PAGE 1 / 107

Image# 201508189000845396

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X F	For Other Than An A	uthorized Committ	ee	Office I	Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typi over the lines.	ng, type	12FE4M5	
National Association of	f Mutual Insurance	Companies PAC			
<u> </u>					
ADDRESS (number and street)	3601 Vincennes Road				
Check if different than previously reported. (ACC)	PO Box 68700 Indianapolis			IN 4626	68
2. FEC IDENTIFICATION NU	JMBER ▼	CITY	S.	TATE 🛦	ZIP CODE ▲
C C00170258	3.		NEW (N) OR	AMENDED (A))
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q	Report Due On: N	Mar 20 (M3)	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	X Aug 20 (M8) Sep 20 (M9) Oct 20 (M10 General (12G)	(Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
Quarterly Report (Q October 15 Quarterly Report (Q January 31 Year-End Report (Y	Report for the:	Convention etion on	(12C)	Special (12S)	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)	n (d) 30-Day POST-Election Report for the:		G)	Runoff (30R)	Special (30S)
5. Covering Period 07	M / D D / Y Y	through	M M M 07		State of
I certify that I have examined thit Type or Print Name of Treasurer Signature of Treasurer $Mr. G$		_		M = M / D	
NOTE: Submission of false, errone	eous, or incomplete informa				
Office Use Only		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		FE	C FORM 3X Rev. 12/2004

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name National Association of Mutual Insurance Companies PAC 2015 07 2015 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 78506.16 January 1, 2015 (b) Cash on Hand at 19093.36 Beginning of Reporting Period..... 315686.31 40021.06 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 59114.42 394192.47 6(a) and 6(c) for Column B)..... 18932.04 354010.09 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 40182.38 40182.38 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on

Schedule C and/or Schedule D)

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

0.00

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

National Association of Mutual Insurance Companies PAC

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
Contributions (other than loans) From:					
(a) Individuals/Persons Other					
Than Political Committees					
(i) Itemized (use Schedule A)	29972.70	213077.96			
(ii) Unitemized	7735.57	82498.38			
(iii) TOTAL (add		205570.04			
Lines 11(a)(i) and (ii)▶	37708.27	295576.34			
(I) Palifical Part Occupition	0.00	0.00			
(b) Political Party Committees	0.00	5.00			
(c) Other Political Committees	2000.00	19000.00			
(such as PACs)(d) Total Contributions (add Lines	7	1000000			
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry					
Totals to Line 33, page 5)	39708.27	314576.34			
Transfers From Affiliated/Other					
Party Committees	0.00	0.00			
Tarty Committees	0.00	3.00			
All Loans Received	0.00	0.00			
7.11 25415 115551755	7				
Lean Denouments Descived	0.00	0.00			
Loan Repayments Received	0.00	0.00			
Offsets To Operating Expenditures					
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	311.17	1078.97			
Refunds of Contributions Made	7	1070.57			
to Federal Candidates and Other					
Political Committees	0.00	0.00			
Other Federal Receipts	3.00				
(Dividends, Interest, etc.)	1.62	31.00			
Transfers from Non-Federal and Levin Funds	7	7			
(a) Non-Federal Account					
(from Schedule H3)	0.00	0.00			
(1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7				
(b) Levin Funds (from Schedule H5)	0.00	0.00			
(b) Leviii i unus (iioin schedule 115)					
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00			
(o) Total Transfers (and To(a) and To(b))	7	0.00			
Total Receipts (add Lines 11(d),					
12, 13, 14, 15, 16, 17, and 18(c))	40021.06	315686.31			
\(\text{\$\exititt{\$\text{\$\exititt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\texititt{\$\text{\$\text{\$\text{\$\text{\$\texitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\ti	7				
Total Federal Receipts					
(subtract Line 18(c) from Line 19)▶	40021.06	315686.31			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN B Calendar Year-to-Date			
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total This Period	Calcinal Teal-to-Date		
	(i) Federal Share	0.00	0.00		
	(ii) Non Fodoval Chara	0.00	0.00		
	(ii) Non-Federal Share(b) Other Federal Operating	0.00	3.00		
	Expenditures	182.04	1510.09		
	(c) Total Operating Expenditures	192.04	1510.00		
2	(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	182.04	1510.09		
۷.	Committees	0.00	0.00		
3.	Contributions to Federal Candidates/Committees and Other Political Committees	0.00	329000.00		
4.	Independent Expenditures				
5.	(use Schedule E)	0.00	0.00		
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
6.	Loan Repayments Made	0.00	0.00		
7.	Loans Made	0.00	0.00		
8.	Refunds of Contributions To: (a) Individuals/Persons Other		1050.00		
	Than Political Committees	0.00	1250.00		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees (such as PACs)	0.00	0.00		
	(d) Total Contribution Refunds				
	(add Lines 28(a), (b), and (c))▶	0.00	1250.00		
9.	Other Disbursements	18750.00	22250.00		
^	Fodoral Floation Activity (2.11.5.C. 8421/20))	,			
υ.	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity				
	(from Schedule H6)		200		
	(i) Federal Share	0.00	0.00		
	(ii) "Levin" Share	0.00	0.00		
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00		
	(c) Total Federal Election Activity (add	0.00	0.00		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
١.	Total Disbursements (add Lines 21(c), 22,				
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	18932.04	354010.09		
2.	Total Federal Disbursements				
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	18932.04	354010.09		
	110111 EII10 01/	10002.07	20.000		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

1 20 1 01111 01 (1101: 02/2000)		i ago o		
III. Net Contributions/Operating Expenditures				
33. Total Contributions (other than loans) (from Line 11(d), page 3)	39708.27	314576.34		
4. Total Contribution Refunds (from Line 28(d))	0.00	1250.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	39708.27	313326.34		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	182.04	1510.09		
7. Offsets to Operating Expenditures (from Line 15, page 3)	311.17	1078.97		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	-129.13	431.12		

	FOR	R LINE	NU	MBER	:	PAGE	Ξ.	6	OF	1	07
Use separate schedule(s)	(che	eck only	or	ne)							
for each category of the Detailed Summary Page	×	11a		11b		11c		12			
		13		14		15		16		Π.	17

or for commercial purposes, other than using t	he name and address of any political committee t	
NAME OF COMMITTEE (In Full) National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial) A. Mr. Tim F. Sullivan RPLU		Date of Receipt
Mailing Address PO Box 68700		07 02 2015
City Indianapolis	State Zip Code IN 46268	Transaction ID : A6E898221CB6B4A96B78 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	96.15
Name of Employer NAMIC Insurance Company, Inc. Receipt For: Primary General Other (specify) ▼	Occupation President & CEO Aggregate Year-to-Date ▼ 1249.95	
Full Name (Last, First, Middle Initial) 3. Mr. Randall Trinklein		Date of Receipt
Mailing Address One Mutual Avenue City Frankenmuth FEC ID number of contributing federal political committee.	State Zip Code MI 48787	07 02 2015 Transaction ID : AD8A776DC8E704A8EB82 Amount of Each Receipt this Period 39.00
Name of Employer Frankenmuth Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Vice President of Administration Aggregate Year-to-Date ▼ 546.00	
Full Name (Last, First, Middle Initial) Ms. Debora K. Liden Mailing Address PO Box 592 City Thief River Falls	State Zip Code MN 56701	Date of Receipt 07 02 2015 Transaction ID : A9CEA2C822AED49A6B2 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Bray-Gentilly Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Manager Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)	•	635.15
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: **PAGE** 7 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Jami Kelly Date of Receipt Mailing Address One Mutual Avenue 02 2015 City State Zip Code Transaction ID: AEAC7B735BF544DC785A Frankenmuth MI 48787 Amount of Each Receipt this Period FEC ID number of contributing 39.00 federal political committee. Name of Employer Occupation Vice President Frankenmuth Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 546.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Andrew Knudsen Date of Receipt Mailing Address One Mutual Avenue 02 07 2015 City State Zip Code Transaction ID: A950B34D171754A2D9B0 Frankenmuth MI 48787 Amount of Each Receipt this Period FEC ID number of contributing 38.00 federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President, Claims Receipt For: Aggregate Year-to-Date ▼ Primary General 532.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Phil McCain Date of Receipt Mailing Address One Mutual Avenue 02 07 2015 City State Zip Code Transaction ID: AED0BB6F778DB42498F4 MI Frankenmuth 48787 Amount of Each Receipt this Period FEC ID number of contributing 38.47 С federal political committee. Name of Employer Occupation Vice President, IT Frankenmuth Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 538.58 Other (specify) 115.47 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: **PAGE** 8 OF 107 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Neil Alldredge Date of Receipt Mailing Address PO Box 68700 02 2015 City Zip Code State Transaction ID: A56493E85A03446B7934 Indianapolis IN 46268 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation National Association of Mutual Insuran Senior Vice President - State and Poli Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. David Middleton Date of Receipt Mailing Address PO Box 68700 02 07 2015 City State Zip Code Transaction ID: AAAC2A24DEE98424BB0D IN Indianapolis 46268 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation National Association of Mutual Insuran Vice President - Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Robert Detlefsen PhD Date of Receipt Mailing Address PO Box 68700 02 07 2015 City Zip Code State Transaction ID: A84A205841E1740B2B85 IN Indianapolis 46268 Amount of Each Receipt this Period FEC ID number of contributing 43.48 С federal political committee. Name of Employer Occupation National Association of Mutual Insuran Vice President - Public Policy Receipt For: Aggregate Year-to-Date ▼ Primary General 565.24 Other (specify) 123.48 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

	FOF	R LINE	NU	IMBER	:	PAGE	9	OF	10
Use separate schedule(s)	(che	ck only	or	ne)					
for each category of the Detailed Summary Page	×	11a		11b		11c	12		
		13		14		15	16		\Box_{17}

Any information copied from such Reports and	Statements may not be sold or used by any pers	on for the purpose of soliciting contributions
	e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Fred A. Edmond CPCU, CIC Mailing Address One Mutual Avenue City Frankenmuth FEC ID number of contributing federal political committee. Name of Employer Frankenmuth Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48787 C Occupation President & COO Aggregate Year-to-Date ▼	Date of Receipt 07 02 2015 Transaction ID: AB711EEE7DB344EA4A28 Amount of Each Receipt this Period 77.00
Full Name (Last, First, Middle Initial) Mr. John S. Benson Mailing Address One Mutual Avenue City Frankenmuth	State Zip Code MI 48787	Date of Receipt O7 O2 2015 Transaction ID : A0C41A5D6298B4E13950 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Frankenmuth Mutual Insurance Company Receipt For: □ Primary □ General □ Other (specify) ▼	C Occupation Chairman & CEO Aggregate Year-to-Date ▼ 1638.00	117.00
Full Name (Last, First, Middle Initial) Mr. Brian S. McLeod Mailing Address One Mutual Avenue City Frankenmuth FEC ID number of contributing	State Zip Code MI 48787	Date of Receipt 07 02 2015 Transaction ID : A557F57CF0CCD418CB6F Amount of Each Receipt this Period
federal political committee. Name of Employer Frankenmuth Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Vice President, Secretary & Treasurer Aggregate Year-to-Date ▼ 539.00	38.50
SUBTOTAL of Receipts This Page (optional)		232.50
TOTAL This Period (last page this line number	only)	

	FOF	FOR LINE NUMBER: PAGE 10 OF								
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
,		13		14		15		16		17

Full Name (Last, First, Middle Initial) Mr. Bryan Gilleland Mailing Address One Mutual Avenue		Date of Receipt
City Frankenmuth FEC ID number of contributing federal political committee. Name of Employer Frankenmuth Mutual Insurance Company Receipt For:	State Zip Code MI 48787 C Occupation Senior Vice President Aggregate Year-to-Date ▼	O7 02 2015 Transaction ID : A73738B42A3544B4181 Amount of Each Receipt this Period 38.47
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	538.58	
Mr. Eric Nelson Mailing Address 1460 Wells St City Enumclaw FEC ID number of contributing federal political committee. Name of Employer Mutual of Enumclaw Insurance Company Receipt For: Primary General Other (specify) ▼	State Zip Code WA 98022 C Occupation President & CEO Aggregate Year-to-Date ▼ 1750.00	Date of Receipt 07 02 2015 Transaction ID: A437222E26ED04A99B3 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Rich Hawkins Mailing Address 1460 Wells St City Enumclaw FEC ID number of contributing federal political committee. Name of Employer Mutual of Enumclaw Insurance Company Receipt For: Primary General Other (specify)	State Zip Code WA 98022 C Occupation Vice President, Marketing Aggregate Year-to-Date ▼ 539.00	Date of Receipt 07 02 2015 Transaction ID : AFABCA5DCB1D04E10 Amount of Each Receipt this Period 77.00

FOR LINE NUMBER: PAGE 11 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Athan M. Shinas Date of Receipt Mailing Address 1460 Wells St 02 2015 City Zip Code State Transaction ID: AE1E36FD765B34D4DADF WA Enumclaw 98022 Amount of Each Receipt this Period FEC ID number of contributing 208.34 federal political committee. Name of Employer Occupation General Counsel Mutual of Enumclaw Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 312.51 Other (specify) Full Name (Last, First, Middle Initial) B. Chris Belcher Date of Receipt Mailing Address PO Box 618 02 07 2015 City State Zip Code Transaction ID: A1E2C4FF6DC9E4B84AAF MO Columbia 65205 Amount of Each Receipt this Period FEC ID number of contributing 66.74 federal political committee. Name of Employer Occupation Columbia Mutual Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General 504.24 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Bernard Fechtel Date of Receipt Mailing Address PO Box 618 02 2015 07 City Zip Code State Transaction ID: ADB3F143A3D6C4D6ABCE MO Columbia 65205 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Columbia Mutual Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1275.08 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

	FOF	FOR LINE NUMBER: PAGE 12 OF									
Use separate schedule(s)	(che	ck only	or	ne)							
for each category of the Detailed Summary Page	X	11a		11b		11c		12			
		13		14		15		16		17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Joe Thesing Date of Receipt Mailing Address PO Box 68700 02 2015 City Zip Code State Transaction ID: A066E29631B284468B3D IN Indianapolis 46268 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Vice President - State Affairs National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Charles M. Chamness Date of Receipt Mailing Address PO Box 68700 07 02 2015 City State Zip Code Transaction ID: AD7086D1B3D8F4783A4C IN Indianapolis 46268 Amount of Each Receipt this Period FEC ID number of contributing 90.00 federal political committee. Name of Employer Occupation National Association of Mutual Insuran President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1170.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Kristen Spriggs Date of Receipt Mailing Address PO Box 68700 02 2015 07 City Zip Code State Transaction ID: A4D85DA54228643D2AA4 IN Indianapolis 46268 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Vice President - Member Development National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 13 OF 107 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Terry Suttner Date of Receipt Mailing Address PO Box 68700 02 2015 City Zip Code State Transaction ID: AC94B7409DB6444BE9D8 Indianapolis IN 46268 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Vice President - Membership/Insurance National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John Hair Date of Receipt Mailing Address 122 C St NW Ste 540 02 07 2015 City State Zip Code Transaction ID: A476DD907B0124A18A27 DC Washington 20001 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation National Association of Mutual Insuran Federal Affairs Director Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Thomas Karol Date of Receipt Mailing Address 122 C St NW 02 07 2015 Ste 540 City Zip Code State Transaction ID: A4EFC0D7858CB4BF2ABD DC Washington 20001 Amount of Each Receipt this Period FEC ID number of contributing 45.46 С federal political committee. Name of Employer Occupation Federal Affairs Counsel National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 590.98 Other (specify) 125.46 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOF	R LINE	NU	MBER	PAGE	_ ′	14	OF	107	
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16	Г	17

	d Statements may not be sold or used by any per- the name and address of any political committee t	
NAME OF COMMITTEE (In Full) National Association of Mutua	al Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Gregg A. Dykstra J.D. Mailing Address 3601 Vincennes Rd City Indianapolis FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code IN 46268 C Occupation Chief Operating Officer Aggregate Year-to-Date ▼ 1250.08	Date of Receipt O7
Full Name (Last, First, Middle Initial) Mr. Jimi Grande Mailing Address 122 C St NW Ste 540 City Washington FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code DC 20001 C Occupation Senior Vice President-Federal and Poli Aggregate Year-to-Date ▼ 1477.32	Date of Receipt O7
Full Name (Last, First, Middle Initial) Mr. Paul Tetrault Mailing Address PO Box 68700 City Indianapolis FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code IN 46268 C Occupation State & Policy Affairs Counsel Aggregate Year-to-Date ▼ 260.00	Date of Receipt O7
SUBTOTAL of Receipts This Page (optional)	<u> </u>	229.80
TOTAL This Period (last page this line numb	er only)	

	FO	R LINE	NU	MBER	:	PAGE	15 OF	107
Use separate schedule(s)	(che	eck only	or	ne)				
for each category of the Detailed Summary Page	×	11a		11b		11c	12	
_ common common, cogo		13		14		15	16	17

Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any per the name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutua	Il Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Ms. Irica Solomon Mailing Address 122 C St NW Ste 540 City Washington	State Zip Code DC 20001	Date of Receipt 07 02 2015 Transaction ID : A75DC5C3C261F49DB9C2 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	Occupation Vice President of Federal and Politica Aggregate Year-to-Date ▼ 590.98	45.46
Full Name (Last, First, Middle Initial) Mr. Scott Mackey Mailing Address PO Box 618 City	State Zip Code	Date of Receipt 07 02 2015 Transaction ID : AB2138891456D4725965
Columbia FEC ID number of contributing federal political committee. Name of Employer Columbia Mutual Insurance Company Receipt For: □ Primary □ General □ Other (specify) ▼	MO 65205 C Occupation Vice President Aggregate Year-to-Date ▼ 300.00	Amount of Each Receipt this Period 300.00
Full Name (Last, First, Middle Initial) Mr. Robert Gerding Mailing Address PO Box 618 City Columbia FEC ID number of contributing federal political committee. Name of Employer Columbia Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MO 65205 C Occupation Director Aggregate Year-to-Date ▼ 750.00	Date of Receipt 07 02 2015 Transaction ID : ABA5AFDDC7CEE4378970 Amount of Each Receipt this Period 750.00
SUBTOTAL of Receipts This Page (optional).	>	1095.46
TOTAL This Period (last page this line numb	er only)	

	FOF	R LINE	NU	IMBER	:	PAGE	•	16 OF	107
Use separate schedule(s)	(che	ck only	or	ne)					
for each category of the Detailed Summary Page	X	11a		11b		11c		12	
cannon, rage		13		14		15		16	17

	and Statements may not be sold or used by any per g the name and address of any political committee	
NAME OF COMMITTEE (In Full) National Association of Mutu	ual Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Benjamin Galloway Mailing Address PO Box 618		Date of Receipt M M / D D / Y = Y = Y = Y 07 02 _ 2015 _
City Columbia FEC ID number of contributing federal political committee.	State Zip Code MO 65205	Transaction ID : A1C4990DF432D4AC7BF4 Amount of Each Receipt this Period 500.00
Name of Employer Columbia Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Senior Vice President & CRO Aggregate Year-to-Date ▼ 800.00	
Full Name (Last, First, Middle Initial) Mr. Jeffrey Greenwald Mailing Address PO Box 618	70.04	Date of Receipt 07 02 2015
City Columbia FEC ID number of contributing federal political committee. Name of Employer	State Zip Code MO 65205	Amount of Each Receipt this Period 1000.00
Columbia Mutual Insurance Company Receipt For: Primary General Other (specify)	Occupation Director Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Teresa Maledy Mailing Address c/o Commerce Bank PO Box 1677 City Columbia FEC ID number of contributing federal political committee. Name of Employer Columbia Mutual Insurance Company Receipt For: Primary General	State Zip Code MO 65205 C Occupation Director Aggregate Year-to-Date ▼	Date of Receipt 07 02 2015 Transaction ID : AFD30A81AF8204F98817 Amount of Each Receipt this Period 500.00
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	500.00 hber only)	2000.00

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NAME OF COMMITTEE (In Full) National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Ms. Betty Schuster Mailing Address PO Box 618 City Columbia FEC ID number of contributing federal political committee. Name of Employer Columbia Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MO 65205 C Occupation Director Aggregate Year-to-Date ▼ 600.00	Date of Receipt 07 02 2015 Transaction ID : AE13ACAACAA004163BEI Amount of Each Receipt this Period 600.00
Full Name (Last, First, Middle Initial) Mr. William Gusenius Mailing Address PO Box 618 City Columbia FEC ID number of contributing federal political committee. Name of Employer Columbia Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MO 65205 C Occupation Director Aggregate Year-to-Date ▼ 500.00	Date of Receipt 07 02 2015 Transaction ID: A3679B854C5C3406AB01 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Ms. Laura Hinson Mailing Address 4405 Amherst Ave City Dallas FEC ID number of contributing federal political committee. Name of Employer Columbia Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code TX 75225 C Occupation Director Aggregate Year-to-Date ▼ 500.00	Date of Receipt 07 02 2015 Transaction ID: AECA2DB07594243B6BA0 Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional).	<u> </u>	1600.00
TOTAL This Period (last page this line number	er only)	

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	d Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full) National Association of Mutua		
Full Name (Last, First, Middle Initial) Ms. Gina Gervino Mailing Address PO Box 618 City Columbia FEC ID number of contributing federal political committee. Name of Employer Columbia Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MO 65205 C Occupation Vice President/Secretary & General Cou Aggregate Year-to-Date ▼ 500.00	Date of Receipt 07 02 2015 Transaction ID : A1C06B98ECED647DBB10 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr. Robert O'Reilly Mailing Address PO Box 618 City Columbia FEC ID number of contributing federal political committee. Name of Employer Columbia Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MO 65205 C Occupation VP/Branch Manager Aggregate Year-to-Date ▼ 275.00	Date of Receipt 07 02 2015 Transaction ID: A0C10BF78A0C546BC972 Amount of Each Receipt this Period 275.00
Full Name (Last, First, Middle Initial) Mr. Michael LeBlanc Mailing Address 11138 State Bridge Road, Ste 200 City Johns Creek FEC ID number of contributing federal political committee. Name of Employer Columbia Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code GA 30022 C Occupation Vice President Claims Aggregate Year-to-Date ▼ 265.00	Date of Receipt 07 02 2015 Transaction ID : A9EFE27DD1BF7413E8CC Amount of Each Receipt this Period 265.00
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	nd Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full) National Association of Mutu	al Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Dwight Tully Mailing Address PO Box 2180 City Salina FEC ID number of contributing federal political committee. Name of Employer Columbia Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code KS 67402 C Occupation Vice President Aggregate Year-to-Date ▼ 250.00	Date of Receipt 07 02 2015 Transaction ID: ADC32E88FD1CA45CF949 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Kelly J. Klug Mailing Address PO Box 618 City Columbia FEC ID number of contributing federal political committee. Name of Employer Federated Rural Electric Insurance Exc Receipt For: Primary Other (specify)	State Zip Code MO 65205 C Occupation Senior Vice President, Treasurer, and Aggregate Year-to-Date ▼ 500.00	Date of Receipt 07 02 2015 Transaction ID: A205638ACB3D044AE867 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr. Jon Jorgensen Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909 C Occupation Assistant Vice President Underwriting Aggregate Year-to-Date ▼ 245.00	Date of Receipt 07 02 2015 Transaction ID : A757C49097FDC4C488DD Amount of Each Receipt this Period 35.00
SUBTOTAL of Receipts This Page (optional)	785.00
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	FOR LINE NUMBER: PAGE 20	OF 107
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	d Statements may not be sold or used by any per- the name and address of any political committee t	
NAME OF COMMITTEE (In Full) National Association of Mutua	al Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Ms. Lisa M Ayotte Mailing Address PO Box 30660		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909 C Occupation Assistant Vice President Aggregate Year-to-Date ▼ 294.00	Transaction ID: A1905283B87E144A49F7 Amount of Each Receipt this Period 42.00
Full Name (Last, First, Middle Initial) Ms. Gayle Fisher Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909 C Occupation Assistant Vice President-Life Operatio Aggregate Year-to-Date ▼ 595.00	Date of Receipt 07 02 2015 Transaction ID: A279FF2541F5F46A8844 Amount of Each Receipt this Period 85.00
Full Name (Last, First, Middle Initial) Ms. Carolyn B. Muller Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909 C Occupation Senior Vice President - Claims Aggregate Year-to-Date ▼	Date of Receipt 07 02 2015 Transaction ID: A0F8F4F94C6CF42BE8E4 Amount of Each Receipt this Period 85.00
SUBTOTAL of Receipts This Page (optional)	•	212.00
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Alice Hamm Date of Receipt Mailing Address PO Box 30660 02 2015 City State Zip Code Transaction ID: AB22218D3A986440582D Lansing MI 48909 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Drew A. Klasing Date of Receipt Mailing Address PO Box 30660 07 02 2015 City State Zip Code Transaction ID: A1FD33E5B41C04C21AEA MI Lansing 48909 Amount of Each Receipt this Period FEC ID number of contributing 45.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Manager, Home Office Claims Receipt For: Aggregate Year-to-Date ▼ Primary General 315.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Mike Pike Date of Receipt Mailing Address PO Box 30660 02 07 2015 City Zip Code State Transaction ID: A351DE60E2E7C41FE97A MI Lansing 48909 Amount of Each Receipt this Period FEC ID number of contributing 35.00 С federal political committee. Name of Employer Occupation

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245.00

Human Resources Professional

Aggregate Year-to-Date ▼

Auto-Owners Insurance Company

Other (specify)

General

Receipt For:

Primary

FOR LINE NUMBER: PAGE 22 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Cathy M. Adcock Date of Receipt Mailing Address PO Box 30660 02 2015 City Zip Code State Transaction ID: A8CF015FE497F4F809E1 Lansing MI 48909 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 595.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Mark Wenger Date of Receipt Mailing Address PO Box 30660 07 02 2015 City State Zip Code Transaction ID: A96C34AC571054D46A5F MI Lansing 48909 Amount of Each Receipt this Period FEC ID number of contributing 84.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Vice President and Chief P&C Receipt For: Aggregate Year-to-Date ▼ Primary General 588.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Jeffrey Tagsold Date of Receipt Mailing Address PO Box 30660 02 07 2015 City Zip Code State Transaction ID: AD10DCF24AF31473186F MI Lansing 48909 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation President Auto-Owners Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) 269.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 23 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Ian R. Ward Date of Receipt Mailing Address PO Box 30660 2015 02 City Zip Code State Transaction ID: A3F7A385F8B4345A0B27 Lansing MI 48909 Amount of Each Receipt this Period FEC ID number of contributing 70.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Senior Vice President, Investments and Receipt For: Aggregate Year-to-Date ▼ Primary General 490.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Mr. William Woodbury Date of Receipt Mailing Address 6101 Anacapri Blvd 07 02 2015 City State Zip Code Transaction ID: AA8E7EB214F4B41F8BD3 MI Lansing 48917 Amount of Each Receipt this Period FEC ID number of contributing 91.67 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** SVP, Secretary & General Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 641.69 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Sherry L. McKenzie AAM, AIS Date of Receipt Mailing Address PO Box 30660 02 07 2015 City State Zip Code Transaction ID: A7427FF83F2A0417DB72 MI Lansing 48909 Amount of Each Receipt this Period FEC ID number of contributing 75.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Assistant Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 525.00 Other (specify) 236.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 24 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Mary S. Pierce Date of Receipt Mailing Address PO Box 30660 02 2015 City Zip Code State Transaction ID: A521A2E711FA34016990 Lansing MI 48909 Amount of Each Receipt this Period FEC ID number of contributing 58.33 federal political committee. Name of Employer Occupation Vice President **Auto-Owners Insurance Company** Receipt For: Aggregate Year-to-Date ▼ Primary General 408.31 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Michael D. Baker Date of Receipt Mailing Address PO Box 30660 02 07 2015 City State Zip Code Transaction ID: A7AC9DCA3C57E434291B MI Lansing 48909 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) C. Mr. James J. Walsh Jr. Date of Receipt Mailing Address PO Box 30660 02 07 2015 City Zip Code State Transaction ID: A344F1BEB1F60421EA67 MI Lansing 48909 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Vice President-Claims Auto-Owners Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 158.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 25 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Scott A. Michael Date of Receipt Mailing Address PO Box 30660 02 2015 City Zip Code State Transaction ID: A66F0D797E05D495C875 Lansing MI 48909 Amount of Each Receipt this Period FEC ID number of contributing 45.00 federal political committee. Name of Employer Occupation AVP - Personal Lines Auto **Auto-Owners Insurance Company** Receipt For: Aggregate Year-to-Date ▼ Primary General 315.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Diane Marshall Date of Receipt Mailing Address PO Box 30660 02 07 2015 City State Zip Code Transaction ID: A88F74CD034D945E0BCA MI Lansing 48909 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) C. Mr. Andrew M. Eriksen Date of Receipt Mailing Address PO Box 30660 02 07 2015 City Zip Code State Transaction ID: AF2D3F139F1AB45D3B0A MI Lansing 48909 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Assistant Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) 245.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

	F	OR	LINE	NU	MBER	:	PAGE	2	26	OF	1	107
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Tim Lynch Date of Receipt Mailing Address PO Box 30660 02 2015 City State Zip Code Transaction ID: AD3FF4C03D37C45B1B4E Lansing MI 48909 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 291.69 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Paul Otto Date of Receipt Mailing Address PO Box 30660 02 07 2015 City State Zip Code Transaction ID: A70301E27784D4DF8B93 MI Lansing 48909 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Vice President, Financial Accounting Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Kevin Barnes Date of Receipt Mailing Address PO Box 30660 02 07 2015 Zip Code City State Transaction ID: A66F0D29822284AB5848

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MI

С

Occupation

Regional Vice President

Aggregate Year-to-Date ▼

30.00

Amount of Each Receipt this Period

Lansing

FEC ID number of contributing

Auto-Owners Insurance Company

Other (specify)

General

federal political committee.

Name of Employer

Primary

Receipt For:

	FOF	R LINE	NU	MBER	PAGE	2	27 (OF	107	
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Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Barry Preslaski Mailing Address PO Box 30660		Date of Receipt
City	State Zip Code	07 02 2015 Transaction ID : A92D63D5C4A6C41ABA4I
Lansing	MI 48909	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	30.00
Name of Employer	Occupation	†
Auto-Owners Insurance Company	Vice President	
Receipt For: Primary General Other (specify) —	Aggregate Year-to-Date ▼	
Other (specify) ▼	210.00	
Full Name (Last, First, Middle Initial) 3. Mr. Charles W. Drier		Date of Receipt
Mailing Address PO Box 3337		07 02 2015
City	State Zip Code	Transaction ID : AF699567690E740B3B9D
Peoria	IL 61612	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	75.00
Name of Employer	Occupation	1
Auto-Owners Insurance Company	Regional Vice President	4
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	525.00	
Full Name (Last, First, Middle Initial) Mr. Lee Rademacher		Date of Receipt
Mailing Address PO Box 30660		07 02 2015
City Lansing	State Zip Code MI 48909	Transaction ID : A73413E3A3C784DB28EA Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	30.00
Name of Employer	Occupation	1
Auto-Owners Insurance Company	Assistant Vice President-Commercial Li]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	210.00	
SUBTOTAL of Receipts This Page (optional)		135.00
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NAME OF COMMITTEE (In Full)		
National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) A. Mr. Kraig T. Klopfenstein		Date of Receipt
Mailing Address PO Box 30660		M M / D D / Y Y Y Y Y
City	State Zip Code	07 02 2015 Transaction ID : A4E386BB68D3C484DAE3
Lansing	MI 48909	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	7
Auto-Owners Insurance Company	Sales/Marketing	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		
Other (specify) ▼	525.00	
Full Name (Last, First, Middle Initial) 3. Ms. Diane Allen		Date of Receipt
		Date of Receipt
Mailing Address 6101 Anacapri Blvd		07 02 _ 2015 _
City	State Zip Code	Transaction ID : AC0E4D3646C0B4F06A81
Lansing	MI 48917	Amount of Each Receipt this Period
FEC ID number of contributing		7 thouse of East Procespt that I dried
federal political committee.	C	65.00
Name of Employer	Occupation	-
Auto-Owners Insurance Company	Vice President-Personnel	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		
Other (specify) ▼	455.00	
Full Name (Last, First, Middle Initial)	I .	2. (2. :
Mr. Kenneth Schroeder		Date of Receipt
Mailing Address PO Box 30660		07 02 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: A04E18055B9AC45DF88E
Lansing	MI 48909	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	-
Auto-Owners Insurance Company	Senior Vice President, Commercial Unde	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	250.00	
Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional)		190.00
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	I Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Jonathan R. Riekse Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909 C Occupation Senior Vice President, Personal Lines Aggregate Year-to-Date ▼ 583.31	Date of Receipt 07 02 2015 Transaction ID: A51570081858142FD9AD Amount of Each Receipt this Period 83.33
Full Name (Last, First, Middle Initial) Mr. Daniel J. Thelen Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909 C Occupation Senior Vice President of Human Resourc Aggregate Year-to-Date ▼ 525.00	Date of Receipt 07 02 2015 Transaction ID: A9193A806703A49AA978 Amount of Each Receipt this Period 75.00
Full Name (Last, First, Middle Initial) Mr. James C. Schumacher Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909 C Occupation Director - Agency Systems Aggregate Year-to-Date ▼ 294.00	Date of Receipt 07 02 2015 Transaction ID: A2855E127B4C24E00970 Amount of Each Receipt this Period 42.00
SUBTOTAL of Receipts This Page (optional).	<u> </u>	200.33
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	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutua	al Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Steven C. Speicher Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909 C Occupation Regional Vice President - Forest Regio Aggregate Year-to-Date ▼ 350.00	Date of Receipt 07 02 2015 Transaction ID : AA27FC5E9B7DE44B58BB Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) Ms. Theresa Lewis Mailing Address PO Box 6927 City Richmond FEC ID number of contributing federal political committee. Name of Employer Mutual Assurance Society of Virginia Receipt For: Primary General Other (specify)	State Zip Code VA 23230 C Occupation Secretary-Treasurer Aggregate Year-to-Date ▼ 291.62	Date of Receipt 07 06 2015 Transaction ID: A7C8481109CFF470BA0F Amount of Each Receipt this Period 41.66
Full Name (Last, First, Middle Initial) Mr. Mark Coe Mailing Address PO Box 111 City Bucyrus FEC ID number of contributing federal political committee. Name of Employer Ohio Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code OH 44820 C Occupation IT Manager Aggregate Year-to-Date ▼ 585.00	Date of Receipt 07 06 2015 Transaction ID: AD97EEC6BB42646ABBE3 Amount of Each Receipt this Period 39.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	130.66
TOTAL This Period (last page this line numb	er only)	

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Detailed Summary Page	X	11a		11b		11c		12			
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	Full Name (Last, First, Middle Initial) Mr. David Grove		Date of Receipt
	Mailing Address PO Box 111		07 06 2015
	City	State Zip Code	Transaction ID : ADBAE2E6C8C944CD0A
	Bucyrus	OH 44820	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer	Occupation	
	Ohio Mutual Insurance Company	Assistant Vice President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	300.00	
	Full Name (Last, First, Middle Initial) Mr. Todd E. Albert		Date of Receipt
	Mailing Address PO Box 111		07 06 <u>Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y</u>
	City	State Zip Code	Transaction ID : AD1FCB23EE4BA4DC5B
	Bucyrus	OH 44820	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.00
	Name of Employer	Occupation	
	Ohio Mutual Insurance Company	Chief Information Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
	Full Name (Last, First, Middle Initial) Mr. Jeffrey S. Wrobel Sr.		Date of Receipt
	Mailing Address PO Box 6927		07 06 2015
	City Richmond	State Zip Code VA 23230	Transaction ID : AEBECDF5C768F457D88 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer	Occupation	
	Mutual Assurance Society of Virginia	President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	341.66	
S	Other (specify) ▼ UBTOTAL of Receipts This Page (optional)	7	100.00

	F	OR	LINE	NU	PAGE	3	32 OF	107		
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for each category of the Detailed Summary Page		X	11a		11b		11c		12	
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NAME OF COMMITTEE (In Full) National Association of Mutua	al Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Ms. Theresa Jakubick Mailing Address PO Box 111		Date of Receipt
City Bucyrus FEC ID number of contributing	State Zip Code OH 44820	O7 06 2015 Transaction ID : A93F439D022DC41E0A13 Amount of Each Receipt this Period 20.00
federal political committee. Name of Employer Ohio Mutual Insurance Company Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Project Manager Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) 3. Mr. Mike Horvath CPCU Mailing Address PO Box 111		Date of Receipt 07 06 2015
City Bucyrus FEC ID number of contributing federal political committee.	State Zip Code OH 44820	Transaction ID : AD5BF4528FF524F6BB5A Amount of Each Receipt this Period 20.00
Name of Employer Ohio Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Vice President-Human Resources Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Mr. Martin M. Doto CPCU, MSII Mailing Address 1 Preferred Way	M	Date of Receipt
City New Berlin FEC ID number of contributing federal political committee.	State Zip Code NY 13411	7 06 2015 Transaction ID : AF61E2072FCDB4532896 Amount of Each Receipt this Period
Name of Employer Preferred Mutual Insurance Company Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Senior Vice President Insurance Operat Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)	>	1040.00

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	FOF	FOR LINE NUMBER: PAGE 33 OF								107	
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for each category of the Detailed Summary Page		11a		11b		11c		12			
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	Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutua	Il Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Dennis W. Halaquist Mailing Address 1 Preferred Way City New Berlin FEC ID number of contributing federal political committee. Name of Employer Preferred Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code NY 13411 C Occupation Assistant Vice President Aggregate Year-to-Date ▼ 250.00	Date of Receipt 07 06 2015 Transaction ID: A33986538618F467181C Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Ms. Dona L. Mohr Mailing Address 1725 Hopley Ave City Bucyrus FEC ID number of contributing federal political committee. Name of Employer Ohio Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code OH 44820 C Occupation Assistant Vice President-Quality Servi Aggregate Year-to-Date ▼ 675.00	Date of Receipt 07 06 2015 Transaction ID: A68050256775C4A89AFD Amount of Each Receipt this Period 45.00
Full Name (Last, First, Middle Initial) Mr. Kent B. Shantz Mailing Address PO Box 5626 City Rockford FEC ID number of contributing federal political committee. Name of Employer Rockford Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code IL 61125 C Occupation COO Aggregate Year-to-Date ▼ 577.50	Date of Receipt 07 06 2015 Transaction ID : ADCF311B54C8E4A92830 Amount of Each Receipt this Period 77.00
SUBTOTAL of Receipts This Page (optional).	<u> </u>	372.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 34 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. William Hanby Date of Receipt Mailing Address PO Box 5626 06 2015 City Zip Code State Transaction ID: ABAEB9666E30F475DBB5 Rockford IL 61125 Amount of Each Receipt this Period FEC ID number of contributing 38.46 federal political committee. Name of Employer Occupation Chief Information Officer Rockford Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 278.46 Other (specify) Full Name (Last, First, Middle Initial) **B.** Mr. Jonathan Bergner Date of Receipt Mailing Address 122 C St NW Ste 540 07 06 2015 City State Zip Code Transaction ID: A68C343F588A3414F9E5 DC Washington 20001 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation National Association of Mutual Insuran Federal Affairs Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Sherry Kidwell Date of Receipt Mailing Address PO Box 111 06 07 2015 City Zip Code State Transaction ID: A6033391459774CF3951 OH **Bucyrus** 44820 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation United Ohio Insurance Company Manager of Application Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 558.46 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Frederick Schunter Mailing Address 1460 Wells St City Enumclaw FEC ID number of contributing federal political committee. Name of Employer Mutual of Enumclaw Insurance Company Receipt For: Primary General Other (specify)	State Zip Code WA 98022 C Occupation Director Aggregate Year-to-Date ▼	Date of Receipt 07 08 2015 Transaction ID : ABCE3FB8F3C1E4926980 Amount of Each Receipt this Period 41.67
Full Name (Last, First, Middle Initial) Mr. Cort O'Haver Mailing Address 1460 Wells St City Enumclaw FEC ID number of contributing federal political committee. Name of Employer Mutual of Enumclaw Insurance Company Receipt For: Primary General Other (specify)	State Zip Code WA 98022 C Occupation Director Aggregate Year-to-Date ▼ 500.00	Date of Receipt 07 08 2015 Transaction ID: A4A86FD601CBD4034A32 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr. Tim F. Sullivan RPLU Mailing Address PO Box 68700 City Indianapolis FEC ID number of contributing federal political committee. Name of Employer NAMIC Insurance Company, Inc. Receipt For: Primary General Other (specify)	State Zip Code IN 46268 C Occupation President & CEO Aggregate Year-to-Date ▼ 1346.10	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	•	637.82
TOTAL This Period (last page this line number	r only)	

	FOR LINE NUM	/IBER:	PAGE 3	36 OF	107				
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	d Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full) National Association of Mutua		
Full Name (Last, First, Middle Initial) Mr. Michael Jim Alexander Mailing Address PO Box 2502		Date of Receipt
City Fargo	State Zip Code ND 58108	7 10 2015 Transaction ID : A2F22E23A9F4241BC81D Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Nodak Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Executive Vice President & CEO Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Pamela J. Keeney Mailing Address PO Box 68700	7	Date of Receipt
City Indianapolis FEC ID number of contributing	State Zip Code IN 46268	07 10 2015 Transaction ID : ABA1C9CA4B7D7407581D Amount of Each Receipt this Period 15.00
Name of Employer NAMIC Insurance Company, Inc.	Occupation Vice President - Underwriting & Ins Op	13.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) Mr. Neil Alldredge Mailing Address PO Box 68700		Date of Receipt 07 10 2015
City Indianapolis	State Zip Code IN 46268	Transaction ID : A27EBF6B9E8BD4776AED Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer National Association of Mutual Insuran Receipt For: Primary General	Occupation Senior Vice President - State and Poli Aggregate Year-to-Date ▼	
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	560.00	305.00
TOTAL This Period (last page this line numb	er only)	

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	Statements may not be sold or used by any persone name and address of any political committee to						
NAME OF COMMITTEE (In Full) National Association of Mutual							
Full Name (Last, First, Middle Initial) Mr. Robert Detlefsen PhD Mailing Address PO Box 68700	obert Detlefsen PhD						
City	State Zip Code	07 10 2015					
Indianapolis FEC ID number of contributing federal political committee.	IN 46268	Transaction ID : A0D0297AAD5214273933 Amount of Each Receipt this Period 43.48					
Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify) ▼	Occupation Vice President - Public Policy Aggregate Year-to-Date ▼ 608.72						
Full Name (Last, First, Middle Initial) Mr. David Middleton Mailing Address PO Box 68700		Date of Receipt					
City Indianapolis	State Zip Code IN 46268	7 10 2015 Transaction ID : A9CD978BD68D54CE0BC Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran	Occupation Vice President Figures	40.00					
Receipt For: Primary General Other (specify) ▼	Vice President - Finance Aggregate Year-to-Date ▼ 560.00						
Full Name (Last, First, Middle Initial) C. Mr. Joel P. Murray		Date of Receipt					
Mailing Address 222 Ames St		07 10 2015					
City Dedham	State Zip Code MA 02026	Transaction ID : A4587B740DE914A04BCI Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	20.00					
Name of Employer	Occupation						
Norfolk & Dedham Mutual Fire Insurance Receipt For:	Vice President, Personal Lines & Marke						
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00						
SUBTOTAL of Receipts This Page (optional)	<u> </u>	103.48					
TOTAL This Period (last page this line number	r only)						

FOR LINE NUMBER: PAGE 38 OF 107 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. David N. Cote Esq., AIC Date of Receipt Mailing Address 222 Ames St 2015 City Zip Code State Transaction ID: A4763F12D3B104A6997B Dedham MA 02026 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Norfolk & Dedham Mutual Fire Insurance Corporate Secretary, NE Division Manag Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Thomas Alighieri Date of Receipt Mailing Address 222 Ames St 07 10 2015 City State Zip Code Transaction ID: A57EC1E4E650C4280ACE MA Dedham 02026 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Norfolk & Dedham Mutual Fire Insurance Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. F. Timothy Hegarty Jr., CPCU Date of Receipt Mailing Address 222 Ames St 07 10 2015 City Zip Code State Transaction ID: AA1DFF1732B234987A9F MA Dedham 02026 Amount of Each Receipt this Period FEC ID number of contributing 45.00 С federal political committee. Name of Employer Occupation President & CEO Norfolk & Dedham Mutual Fire Insurance Receipt For: Aggregate Year-to-Date ▼ Primary General 675.00 Other (specify) 85.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 39 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Joseph B. Haswell Date of Receipt Mailing Address 222 Ames St 10 2015 City Zip Code State Transaction ID: ABCC152B46FE7479895B Dedham MA 02026 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Norfolk & Dedham Mutual Fire Insurance Assistant Division Manager, Casualty C Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Robert G. Street AIM Date of Receipt Mailing Address 222 Ames St 07 10 2015 City State Zip Code Transaction ID: A266D818A92BB4039B12 MA Dedham 02026 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Norfolk & Dedham Mutual Fire Insurance NE Casualty Claims Division Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Michael L. Faron CPCU Date of Receipt Mailing Address 222 Ames St 07 10 2015 City Zip Code State Transaction ID: AAF1FFFED42A4803A14 MA Dedham 02026 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Norfolk & Dedham Mutual Fire Insurance Commercial Lines Division Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 580.00 Other (specify) 80.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 40 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Sandra G. Parrillo CPCU Date of Receipt Mailing Address PO Box 6066 2015 10 City Zip Code State Transaction ID: A8AE33A6929364D078BE RΙ Providence 02940 Amount of Each Receipt this Period FEC ID number of contributing 90.00 federal political committee. Name of Employer Occupation President & CEO Providence Mutual Fire Insurance Compa Receipt For: Aggregate Year-to-Date ▼ Primary General 630.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Irica Solomon Date of Receipt Mailing Address 122 C St NW Ste 540 07 10 2015 City State Zip Code Transaction ID: A2C81B585DCCC45D994F DC Washington 20001 Amount of Each Receipt this Period FEC ID number of contributing 45.46 federal political committee. Name of Employer Occupation National Association of Mutual Insuran Vice President of Federal and Politica Receipt For: Aggregate Year-to-Date ▼ Primary General 636.44 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Paul Tetrault Date of Receipt Mailing Address PO Box 68700 07 10 2015 City Zip Code State Transaction ID: ABC1E8660DEDC4916844 IN Indianapolis 46268 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation National Association of Mutual Insuran State & Policy Affairs Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) 155.46 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 41 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutua	al Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. John Hair Meiling Address 400 C C NW		Date of Receipt
Mailing Address 122 C St NW		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ste 540 City	State Zip Code	07 10 2015 Transaction ID : A1298969E745542CB825
Washington	DC 20001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	1
National Association of Mutual Insuran	Federal Affairs Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00	
Full Name (Last, First, Middle Initial) 3. Mr. Terry Suttner		Date of Receipt
Mailing Address PO Box 68700		M = M / D = D / Y = Y = Y
City	State Zip Code	07 10 2015
Indianapolis	IN 46268	Transaction ID : AF2B5029AE35044DA8DC Amount of Each Receipt this Period
	.0200	Amount of Lacif necelpt this Feriou
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	1
National Association of Mutual Insuran	Vice President - Membership/Insurance	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	560.00	
Full Name (Last, First, Middle Initial) C. Ms. Kristen Spriggs		Date of Receipt
Mailing Address PO Box 68700		M = M / D = D / Y = Y = Y
		07 10 2015
City Indianapolis	State Zip Code IN 46268	Transaction ID : A8200F6F559F44946A68 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	-
National Association of Mutual Insuran	Vice President - Member Development	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General	Aggregate real-to-Date ▼	
Other (specify) ▼	280.00	
SUBTOTAL of Receipts This Page (optional)	•	100.00
TOTAL This Period (last page this line numb	er only)	
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FOR LINE NUMBER: PAGE 43 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Joe Thesing Date of Receipt Mailing Address PO Box 68700 2015 10 City Zip Code State Transaction ID: A7B6B03460297494EBEE Indianapolis IN 46268 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Vice President - State Affairs National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 560.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Charles M. Chamness Date of Receipt Mailing Address PO Box 68700 07 10 2015 City State Zip Code Transaction ID: A0032C58100F24BB6AD4 IN Indianapolis 46268 Amount of Each Receipt this Period FEC ID number of contributing 90.00 federal political committee. Name of Employer Occupation National Association of Mutual Insuran President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1260.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Mark H. Ewert Date of Receipt Mailing Address 20935 Swenson Dr 07 10 2015 Ste 200 City Zip Code State Transaction ID: A1FA386D4EF8247BF850 WI Waukesha 53186 Amount of Each Receipt this Period FEC ID number of contributing 110.00 С federal political committee. Name of Employer Occupation Partners Mutual Insurance Company Executive Vice President, Treasurer & Receipt For: Aggregate Year-to-Date ▼ Primary General 660.00 Other (specify) 240.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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	nd Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutua	al Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Mike Horvath CPCU Mailing Address PO Box 111 City Bucyrus FEC ID number of contributing federal political committee. Name of Employer Ohio Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code OH 44820 C Occupation Vice President-Human Resources Aggregate Year-to-Date ▼ 280.00	Date of Receipt O7 13 2015 Transaction ID: A9792F4E4519F44E3881 Amount of Each Receipt this Period 20.00
Full Name (Last, First, Middle Initial) Ms. Theresa Jakubick Mailing Address PO Box 111 City Bucyrus FEC ID number of contributing federal political committee. Name of Employer Ohio Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code OH 44820 C Occupation Project Manager Aggregate Year-to-Date ▼ 320.00	Date of Receipt O7 13 2015 Transaction ID: A5D316795C7E04F5EA82 Amount of Each Receipt this Period 20.00
Full Name (Last, First, Middle Initial) Mr. David Grove Mailing Address PO Box 111 City Bucyrus FEC ID number of contributing federal political committee. Name of Employer Ohio Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code OH 44820 C Occupation Assistant Vice President Aggregate Year-to-Date ▼ 320.00	Date of Receipt O7 13 2015 Transaction ID : A1B312E90BA4742C9AE2 Amount of Each Receipt this Period 20.00
SUBTOTAL of Receipts This Page (optional)	60.00
TOTAL This Period (last page this line numl	ber only)	

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Use separate schedule(s) for each category of the	(che	ck only	or or	ne)						
Detailed Summary Page	X	11a		11b		11c		12		
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Todd E. Albert Date of Receipt Mailing Address PO Box 111 2015 13 City State Zip Code Transaction ID : A10A917B523B8490080E OH Bucyrus 44820 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company Chief Information Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Mark Coe Date of Receipt Mailing Address PO Box 111 07 13 2015 City Zip Code State Transaction ID: A502B1B08808E4D77A03 OH 44820 Bucyrus Amount of Each Receipt this Period FEC ID number of contributing 39.00 federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company IT Manager Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 624.00

Culor (opcony) \		
Full Name (Last, First, Middle Initial) Ms. Dona L. Mohr		Date of Receipt
Mailing Address 1725 Hopley Ave		07 13 2015
City	State Zip Code	Transaction ID : A0F04EC996F864EC3B46
Bucyrus	OH 44820	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.00
Name of Employer	Occupation	
Ohio Mutual Insurance Company	Assistant Vice President-Quality Servi	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	720.00	

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Ms. Sherry Kidwell Mailing Address PO Box 111 City Bucyrus FEC ID number of contributing federal political committee. Name of Employer United Ohio Insurance Company Receipt For: Primary General Other (specify)	State Zip Code OH 44820 C Occupation Manager of Application Aggregate Year-to-Date ▼ 320.00	Date of Receipt O7 13 2015 Transaction ID : A458248866D7D4DA8A54 Amount of Each Receipt this Period 20.00
Full Name (Last, First, Middle Initial) Mrs. Stacey Matteson Mailing Address 1901 Bragaw St Ste 100 City Anchorage FEC ID number of contributing federal political committee. Name of Employer Umialik Insurance Company Receipt For: Primary General Other (specify)	State Zip Code AK 99508 C Occupation Director of Underwriting Aggregate Year-to-Date ▼ 340.00	Date of Receipt O7 15 2015 Transaction ID: A287FB4A7D5F84523A28 Amount of Each Receipt this Period 40.00
Full Name (Last, First, Middle Initial) Mr. Randall Trinklein Mailing Address One Mutual Avenue City Frankenmuth FEC ID number of contributing federal political committee. Name of Employer Frankenmuth Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48787 C Occupation Vice President of Administration Aggregate Year-to-Date ▼ 585.00	Date of Receipt O7 16 2015 Transaction ID : A8BA3D3EB2C3642F1A2D Amount of Each Receipt this Period 39.00
SUBTOTAL of Receipts This Page (optional)	•	99.00
TOTAL This Period (last page this line number	only)	

	FOR	R LINE	NU	MBER	:	PAGE	- 4	47 OF	107
Use separate schedule(s)	(che	ck only	or	ne)					
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) National Association of Mutual I	nsurance Companies PAC	
١.	Full Name (Last, First, Middle Initial) Mr. Phil McCain Mailing Address One Mutual Avenue		Date of Receipt
			07 16 2015
	City Frankenmuth	State Zip Code MI 48787	Transaction ID : ACB37B0A030C24BFB8D0
		1011 40707	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	38.47
	Name of Employer	Occupation	
	Frankenmuth Mutual Insurance Company	Vice President, IT	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	577.05	
3.	Full Name (Last, First, Middle Initial) Mr. Andrew Knudsen		Date of Receipt
	Mailing Address One Mutual Avenue		07 16 2015
	City	State Zip Code	Transaction ID: A98551AAA356A412D9F2
	Frankenmuth	MI 48787	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	38.00
	Name of Employer	Occupation	
	Frankenmuth Mutual Insurance Company	Vice President, Claims	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	570.00	
).	Full Name (Last, First, Middle Initial) Ms. Jami Kelly		Date of Receipt
	Mailing Address One Mutual Avenue		07 16 2015
	City	State Zip Code MI 48787	Transaction ID : AE476BA5F8C654B77B82
	Frankenmuth	MI 48787	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	39.00
	Name of Employer	Occupation	
	Frankenmuth Mutual Insurance Company	Vice President	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	585.00	
s	UBTOTAL of Receipts This Page (optional)		115.47

TOTAL This Period (last page this line number only).....

	FOF	R LINE	NU	IMBER	:	PAGE	_ 4	18 O	F	107
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Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Fred A. Edmond CPCU, CIC Mailing Address One Mutual Avenue		Date of Receipt
City	State Zip Code	07 16 2015 Transaction ID + A623 A D2803 F 724 F 0 7 D 4 7
Frankenmuth	MI 48787	Transaction ID : A633AD28935724597B17 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	77.00
Name of Employer	Occupation	
Frankenmuth Mutual Insurance Company	President & COO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1155.00	
Full Name (Last, First, Middle Initial) 3. Mr. Bryan Gilleland		Date of Receipt
Mailing Address One Mutual Avenue	1	M M / D D / Y Y Y Y Y
City	State Zip Code	07 16 2015 Transaction ID : A1F55AFAA56AC4876A49
Frankenmuth	MI 48787	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.47
Name of Employer	Occupation	
Frankenmuth Mutual Insurance Company	Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 577.05	
Full Name (Last, First, Middle Initial) Mr. Brian S. McLeod		Date of Receipt
Mailing Address One Mutual Avenue		07 16 2015
City Frankenmuth	State Zip Code MI 48787	Transaction ID : A035D8F7CA74B415384B Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.50
Name of Employer	Occupation	
Frankenmuth Mutual Insurance Company	Vice President, Secretary & Treasurer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	577.50	
SUBTOTAL of Receipts This Page (optional)		153.97
TOTAL This Period (last page this line number	only)	

	FOF	R LINE	NU	MBER	:	PAGE	-	49 OF	107
Use separate schedule(s)	(che	ck only	or	ne)					
for each category of the Detailed Summary Page	X	11a		11b		11c		12	
		13		14		15		16	17

	Statements may not be sold or used by any persone name and address of any political committee t	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. John S. Benson Mailing Address One Mutual Avenue City Frankenmuth FEC ID number of contributing federal political committee. Name of Employer Frankenmuth Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48787 C Occupation Chairman & CEO Aggregate Year-to-Date ▼ 1755.00	Date of Receipt O7 16 2015 Transaction ID: A600808A8F52541DBAE3 Amount of Each Receipt this Period 117.00
Full Name (Last, First, Middle Initial) Mr. Dan DeArment PFMM Mailing Address PO Box 646 City Bedford FEC ID number of contributing federal political committee. Name of Employer Friends Cove Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code PA 15522 C Occupation President/CEO Aggregate Year-to-Date ▼ 1750.00	Date of Receipt 07 16 2015 Transaction ID : AB904DD60E41C4E2EAA0 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. David DeGeorge Mailing Address 3030 N 3rd St City Phoenix FEC ID number of contributing federal political committee. Name of Employer CopperPoint Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code AZ 85012 C Occupation Application Development Manager Aggregate Year-to-Date ▼ 270.79	Date of Receipt 07
SUBTOTAL of Receipts This Page (optional)	•	387.83
TOTAL This Period (last page this line number	r only)	

federal political committee.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	FOR LINE NUMBER: PAGE 50 OF									
Use separate schedule(s) for each category of the	(check only one)	, —								
Detailed Summary Page	X 11a 11b	11c	12							
	13 14	15	16 17							

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Donald A. Smith Jr. Date of Receipt Mailing Address 3030 N 3rd St 2015 16 City State Zip Code Transaction ID: A6D155B2010D54A69A3B 85012 ΑZ Phoenix Amount of Each Receipt this Period FEC ID number of contributing C 105.00 federal political committee. Name of Employer Occupation CopperPoint Mutual Insurance Company President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1365.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Phyllis Senseman LUTCF Date of Receipt Mailing Address 3030 N 3rd St 07 16 2015 City State Zip Code Transaction ID: A2B2CE02B1BAE402788D Phoenix ΑZ 85012 Amount of Each Receipt this Period FEC ID number of contributing

Name of Employer CopperPoint Mutual Insurance Company Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Vice President Marketing and Communica Aggregate Year-to-Date ▼ 270.92	
Full Name (Last, First, Middle Initial) C. Ms. Ginny Caro Mailing Address 3030 N 3rd St City Phoenix FEC ID number of contributing federal political committee. Name of Employer CopperPoint Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code AZ 85012 C Occupation Vice President of Claims Services Aggregate Year-to-Date ▼ 541.58	Date of Receipt 07 16 2015 Transaction ID : ACDADF87C60054075884 Amount of Each Receipt this Period 41.66
SUBTOTAL of Receipts This Page (optional)		167.50

TOTAL This Period (last page this line number only).....

20.84

	FOF	R LINE	NU	MBER	:	PAGE	:	51 OF	=	107
Use separate schedule(s)	(che	ck only	or	ne)						
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	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Noel A. Williams Mailing Address 3030 N 3rd St City Phoenix FEC ID number of contributing federal political committee. Name of Employer CopperPoint Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code AZ 85012 C Occupation Vice President of Underwriting Aggregate Year-to-Date ▼ 270.79	Date of Receipt 07 16 2015 Transaction ID : AE69FA4CC422D43108DD Amount of Each Receipt this Period 20.83
Full Name (Last, First, Middle Initial) Ms. Yvette Gonzales Mailing Address 3030 N 3rd St City Phoenix FEC ID number of contributing federal political committee. Name of Employer CopperPoint Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code AZ 85012 C Occupation Senior Vice President & CIO Aggregate Year-to-Date ▼ 541.58	Date of Receipt 07 16 2015 Transaction ID: A1273983AE30F46F5B2B Amount of Each Receipt this Period 41.66
Full Name (Last, First, Middle Initial) Mr. Randy Gerdes Mailing Address 3030 N 3rd St City Phoenix FEC ID number of contributing federal political committee. Name of Employer CopperPoint Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code AZ 85012 C Occupation Vice President of Strategy Aggregate Year-to-Date ▼ 271.44	Date of Receipt O7 16 2015 Transaction ID : AEF46AA2C98F44F039A7 Amount of Each Receipt this Period 20.88
SUBTOTAL of Receipts This Page (optional)	<u> </u>	83.37
TOTAL This Period (last page this line numbe	r only)	1 1 1 1 1 1 1 1

FOR LINE NUMBER: PAGE 52 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Rick Jones Date of Receipt Mailing Address 3030 N 3rd St 2015 16 City Zip Code State Transaction ID: ADBBE22A0215247C28A7 Phoenix ΑZ 85012 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Executive Vice President, COO & Presid CopperPoint Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 541.71 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Daniel Witt Date of Receipt Mailing Address 3030 N 3rd St 07 16 2015 City State Zip Code Transaction ID: A733E67416E4E4A238F7 ΑZ Phoenix 85012 Amount of Each Receipt this Period FEC ID number of contributing 21.00 federal political committee. Name of Employer Occupation CopperPoint Mutual Insurance Company Claims Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 273.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Rick DeGraw Date of Receipt Mailing Address 3030 N 3rd St 07 16 2015 City State Zip Code Transaction ID: A1D1F94C7FD764A75BEA ΑZ Phoenix 85012 Amount of Each Receipt this Period FEC ID number of contributing C 41.66 federal political committee. Name of Employer Occupation **Executive Vice President** CopperPoint Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 541.58 Other (specify) 104.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 53 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Brent Nelson Date of Receipt Mailing Address 3030 N 3rd St 2015 16 City Zip Code State Transaction ID: A8C3C019EAFDA495291A Phoenix ΑZ 85012 Amount of Each Receipt this Period FEC ID number of contributing 20.84 federal political committee. Name of Employer Occupation Chief Financial Officer & Executive Vi CopperPoint Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 270.92 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Bruce D. Thomas PFMM Date of Receipt Mailing Address PO Box 594 07 16 2015 City State Zip Code Transaction ID : ADFB48876669443A59A3 IΑ Algona 50511 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Heartland Mutual Insurance Association President Receipt For: Aggregate Year-to-Date ▼ Primary General 1550.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Jo Ann M. Kuschel PFMM Date of Receipt Mailing Address 545 Harold Meyer Dr 20 07 2015 City State Zip Code Transaction ID: A29F964445B9F40439BF MO New Haven 63068 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Boeuf & Berger Mutual Insurance Compan Secretary/Treasurer/ Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 720.84 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 54 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. John F. Wolf Date of Receipt Mailing Address 2005 Market St Ste 1200 20 2015 City State Zip Code Transaction ID: A245CCF700C1E4F23A81 PΑ Philadelphia 19103 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Indiana Lumbermens Mutual Insurance Co Director Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Brad Fortner PFMM, FMDC Date of Receipt Mailing Address 703 W Poplar St 20 07 2015 City State Zip Code Transaction ID: A8D8093FDD8FC41B792B AR Rogers 72756 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Farmers Protective Mutual Insurance Co Chief Operations Officer/Secretary Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Anthony Decarlo Date of Receipt Mailing Address 2005 Market St 20 07 2015 Ste 1200 City State Zip Code Transaction ID: A7B8795AACA7A463291C PΑ Philadelphia 19103 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Pennsylvania Lumbermens Mutual Insuran Director Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 850.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FO	R LINE	NU	IMBER	:	PAGE	55 OF	107
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for each category of the Detailed Summary Page	>	11a		11b		11c	12	
	ΙГ	13		14		15	16	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Jake Black Date of Receipt Mailing Address PO Box 968 2015 City State Zip Code Transaction ID: A2CE4610F753D4E619AB MO Concordia 64020 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation President CFM Insurance, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Coleman Wortham Date of Receipt Mailing Address 4001 Fitzhugh Ave 07 23 2015 City State Zip Code Transaction ID: A6EB9330D94DD4EC4AF1

Richmond	VA 23230	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mutual Assurance Society of Virginia Receipt For: Primary General Other (specify) ▼	Occupation Director Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. Mr. Justin L. Lear PFMM Mailing Address PO Box 396		Date of Receipt 07 23 2015
City Ellinwood	State Zip Code KS 67526	07 23 2015 Transaction ID : A3FC9CE2559B24385967 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	
Farmers Mutual Insurance Company	CEO	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	

23230

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340.00

Richmond

	FOF	R LINE	NU	MBER	:	PAGE	56 OF	107
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for each category of the Detailed Summary Page	X	11a		11b		11c	12	
		13		14		15	16	17

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Ms. Bernie Dochnahl Mailing Address 1460 Wells St City Enumclaw FEC ID number of contributing federal political committee.	State Zip Code WA 98022	Date of Receipt 07 23 2015 Transaction ID : A060A914520CF4D289AE Amount of Each Receipt this Period 2500.00
Name of Employer Mutual of Enumclaw Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Board of Trustees Aggregate Year-to-Date ▼ 2500.00	
Full Name (Last, First, Middle Initial) Mr. David DeGeorge Mailing Address 3030 N 3rd St City Phoenix	State Zip Code AZ 85012	Date of Receipt M
FEC ID number of contributing federal political committee. Name of Employer CopperPoint Mutual Insurance Company Receipt For:	Occupation Application Development Manager Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 20.83
Primary General Other (specify) ▼	291.62	
Full Name (Last, First, Middle Initial) Mr. Rick DeGraw Mailing Address 3030 N 3rd St City Phoenix FEC ID number of contributing federal political committee. Name of Employer CopperPoint Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code AZ 85012 C Occupation Executive Vice President Aggregate Year-to-Date ▼ 583.24	Date of Receipt O7 24 2015 Transaction ID: A2F7061A754E34FDE819 Amount of Each Receipt this Period 41.66
SUBTOTAL of Receipts This Page (optional)	>	2562.49
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 57 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Daniel Witt Date of Receipt Mailing Address 3030 N 3rd St 2015 24 City Zip Code State Transaction ID: AC6E4B6BE8B6F43DD911 Phoenix ΑZ 85012 Amount of Each Receipt this Period FEC ID number of contributing 21.00 federal political committee. Name of Employer Occupation CopperPoint Mutual Insurance Company Claims Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 294.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Randy Gerdes Date of Receipt Mailing Address 3030 N 3rd St 07 24 2015 City State Zip Code Transaction ID: A0E2561090CF44ADA8A8 ΑZ Phoenix 85012 Amount of Each Receipt this Period FEC ID number of contributing 20.88 federal political committee. Name of Employer Occupation CopperPoint Mutual Insurance Company Vice President of Strategy Receipt For: Aggregate Year-to-Date ▼ Primary General 292.32 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Yvette Gonzales Date of Receipt Mailing Address 3030 N 3rd St 07 24 2015 City State Zip Code Transaction ID: A47F1A22C6C7E4D3AACB ΑZ Phoenix 85012 Amount of Each Receipt this Period FEC ID number of contributing C 41.66 federal political committee. Name of Employer Occupation Senior Vice President & CIO CopperPoint Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 583.24 Other (specify) 83.54 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER:	PAGE 5	58 OF 107
Use separate schedule(s) for each category of the	(check only one)		
Detailed Summary Page	X 11a 11b	11c	12
	13 14	15	16 17

	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutual		
/ Inational Association of Mutual	i insurance Companies FAC	
Full Name (Last, First, Middle Initial) A. Mr. Noel A. Williams		Date of Receipt
Mailing Address 3030 N 3rd St		07 24 2015
City	State Zip Code	Transaction ID : ABFD896D77A4C4EC2811
Phoenix	AZ 85012	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.83
Name of Employer	Occupation	†
CopperPoint Mutual Insurance Company	Vice President of Underwriting	
Receipt For:	Aggregate Year-to-Date ▼]
Primary General Other (specify) ▼	291.62	
Full Name (Last, First, Middle Initial) 3. Ms. Ginny Caro	1	Date of Receipt
Mailing Address 3030 N 3rd St		07 24 _2015 _
City	State Zip Code	Transaction ID : A872E970469F847AB8CF
Phoenix	AZ 85012	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.66
Name of Employer	Occupation	-
CopperPoint Mutual Insurance Company	Vice President of Claims Services	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	583.24	
Full Name (Last, First, Middle Initial)	1	Date of Receipt
Mailing Address 3030 N 3rd St		07 24 2015
City	State Zip Code	Transaction ID : A77F3B727F90B4CD6B6B
Phoenix	AZ 85012	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.67
Name of Employer	Occupation	-
CopperPoint Mutual Insurance Company	Executive Vice President, COO & Presid	
Receipt For:	Aggregate Year-to-Date ▼]
Primary General Other (specify) ▼	583.38	
SUBTOTAL of Receipts This Page (optional)		104.16
COLIGINAL OF FIGURE 17113 F age (optional)		7
TOTAL This Period (last page this line number	er only)	

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Detailed Summary Page	X	11a		11b		11c	12		
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	Statements may not be sold or used by any persthe name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Ms. Phyllis Senseman LUTCF Mailing Address 3030 N 3rd St City Phoenix FEC ID number of contributing federal political committee. Name of Employer CopperPoint Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code AZ 85012 C Occupation Vice President Marketing and Communica Aggregate Year-to-Date ▼ 291.76	Date of Receipt O7 24 2015 Transaction ID: A79CC850AED23407880E Amount of Each Receipt this Period 20.84
Full Name (Last, First, Middle Initial) Mr. Donald A. Smith Jr. Mailing Address 3030 N 3rd St City Phoenix FEC ID number of contributing federal political committee. Name of Employer CopperPoint Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code AZ 85012 C Occupation President & CEO Aggregate Year-to-Date ▼ 1470.00	Date of Receipt O7 24 2015 Transaction ID : AC8840120960F4F82845 Amount of Each Receipt this Period 105.00
Full Name (Last, First, Middle Initial) Mr. Brent Nelson Mailing Address 3030 N 3rd St City Phoenix FEC ID number of contributing federal political committee. Name of Employer CopperPoint Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code AZ 85012 C Occupation Chief Financial Officer & Executive Vi Aggregate Year-to-Date ▼ 291.76	Date of Receipt O7 24 2015 Transaction ID : A09F9B2D5043F4B688D2 Amount of Each Receipt this Period 20.84
SUBTOTAL of Receipts This Page (optional).	>	146.68
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 60 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Michael L. Faron CPCU Date of Receipt Mailing Address 222 Ames St 2015 24 City Zip Code State Transaction ID: AEA609422837344FD81C Dedham MA 02026 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Norfolk & Dedham Mutual Fire Insurance Commercial Lines Division Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 620.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Joseph B. Haswell Date of Receipt Mailing Address 222 Ames St 07 24 2015 City State Zip Code Transaction ID: A1AC2791DA26B4D958D8 MA Dedham 02026 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Norfolk & Dedham Mutual Fire Insurance Assistant Division Manager, Casualty C Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Robert G. Street AIM Date of Receipt Mailing Address 222 Ames St 07 24 2015 City Zip Code State Transaction ID: AF21CC898E9864062A99 MA Dedham 02026 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Norfolk & Dedham Mutual Fire Insurance NE Casualty Claims Division Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) 80.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 61 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. F. Timothy Hegarty Jr., CPCU Date of Receipt Mailing Address 222 Ames St 2015 24 City Zip Code State Transaction ID: A6A9B48DF636641B3927 Dedham MA 02026 Amount of Each Receipt this Period FEC ID number of contributing 45.00 federal political committee. Name of Employer Occupation President & CEO Norfolk & Dedham Mutual Fire Insurance Receipt For: Aggregate Year-to-Date ▼ Primary General 720.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. David N. Cote Esq., AIC Date of Receipt Mailing Address 222 Ames St 07 24 2015 City State Zip Code Transaction ID: A32922EB421B34F8CAC8 MA Dedham 02026 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Norfolk & Dedham Mutual Fire Insurance Corporate Secretary, NE Division Manag Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Thomas Alighieri Date of Receipt Mailing Address 222 Ames St 07 24 2015 City Zip Code State Transaction ID: A841AC2DDDB9E48FF9A1 MA Dedham 02026 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Norfolk & Dedham Mutual Fire Insurance Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) 85.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 62 OF 107 Use separate schedule(s) (check only one) X 11a 11b 12 11c 13 14 15 16

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Joel P. Murray Date of Receipt Mailing Address 222 Ames St 2015 24 City Zip Code State Transaction ID: A4C07F246D8D0477C8DD Dedham MA 02026 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Norfolk & Dedham Mutual Fire Insurance Vice President, Personal Lines & Marke Receipt For: Aggregate Year-to-Date ▼ Primary General 310.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Robert Detlefsen PhD Date of Receipt Mailing Address PO Box 68700 07 27 2015 City State Zip Code Transaction ID: AB8F36AFA20F44C65881 IN Indianapolis 46268 Amount of Each Receipt this Period FEC ID number of contributing 43.48 federal political committee. Name of Employer Occupation National Association of Mutual Insuran Vice President - Public Policy Receipt For: Aggregate Year-to-Date ▼ Primary General 652.20 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Neil Alldredge Date of Receipt Mailing Address PO Box 68700 07 27 2015 City Zip Code State Transaction ID: A483D9FCCC7944FBE9FE IN Indianapolis 46268 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Senior Vice President - State and Poli National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 103.48 SUBTOTAL of Receipts This Page (optional).....

- 9

TOTAL This Period (last page this line number only).....

National Association of Mutual Insuran

General

Receipt For:

В.

Primary

Other (specify)

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for each category of the Detailed Summary Page		11a		11b		11c		12		
		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. David Middleton Date of Receipt Mailing Address PO Box 68700 2015 27 City State Zip Code Transaction ID: A6C97318F8FA04A3EB9E IN Indianapolis 46268 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation

Vice President - Finance

Aggregate Year-to-Date ▼

Full Name (Last, First, Middle Initial) Ms. Pamela J. Keeney		Date of Receipt
Mailing Address PO Box 68700		07 27 _ 2015 _
City	State Zip Code	Transaction ID : AE50DBEBFF7C94A599F8
Indianapolis	IN 46268	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer	Occupation	
NAMIC Insurance Company, Inc.	Vice President - Underwriting & Ins Op	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial)		

600.00

c. Mr. Tim F. Sullivan RPLU Date of Receipt Mailing Address PO Box 68700 27 2015 07 City State Zip Code Transaction ID: AE6083747DAD04048B0D IN Indianapolis 46268 Amount of Each Receipt this Period FEC ID number of contributing C 96.15 federal political committee. Name of Employer Occupation President & CEO NAMIC Insurance Company, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1442.25

FOR LINE NUMBER: PAGE 64 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Stephen F. Fabian Date of Receipt Mailing Address 200 N Main St 2015 27 City Zip Code State Transaction ID: A4E9FE7A401924FAF829 MD Bel Air 21014 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Vice President, Chief Information Offi Harford Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 666.65 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jeff Rink Date of Receipt Mailing Address 200 N Main St 07 27 2015 City State Zip Code Transaction ID: AF3EF5FEF9F1748F8832 MD Bel Air 21014 Amount of Each Receipt this Period FEC ID number of contributing 41.66 federal political committee. Name of Employer Occupation Harford Mutual Insurance Company Vice President of Marketing and Busine Receipt For: Aggregate Year-to-Date ▼ Primary General 333.29 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. John Goodin Date of Receipt Mailing Address 200 N Main St 07 27 2015 City Zip Code State Transaction ID: A24236247697B4D5E959 MD Bel Air 21014 Amount of Each Receipt this Period FEC ID number of contributing 41.66 С federal political committee. Name of Employer Occupation Harford Mutual Insurance Company Assistant Vice President Underwriting Receipt For: Aggregate Year-to-Date ▼ Primary General 333.29 Other (specify) 166.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 65 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Frank P. Kellner III Date of Receipt Mailing Address 200 N Main St 2015 27 City Zip Code State Transaction ID: AC8E2536B529446D6BC7 MD Bel Air 21014 Amount of Each Receipt this Period FEC ID number of contributing 41.66 federal political committee. Name of Employer Occupation Vice President, Claims Harford Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 333.29 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Thomas W. Beach Date of Receipt Mailing Address 2005 Market St Ste 1200 07 27 2015 City State Zip Code Transaction ID: A5C827DECF2A1478690E Philadelphia PA 19103 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Pennsylvania Lumbermens Mutual Insuran Director Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. W. A. Bissette Date of Receipt Mailing Address 2005 Market St 07 27 2015 Ste 1200 City State Zip Code Transaction ID: A09F16A758D5943F3B67 PΑ Philadelphia 19103 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Pennsylvania Lumbermens Mutual Insuran Director Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1041.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER: PAGE 66 OF 1								107	
Use separate schedule(s)	(check only one)									
for each category of the Detailed Summary Page	>	11a		11b		11c		12		
		13		14		15		16		17

Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Robert F. Ohler Mailing Address 200 N Main St		Date of Receipt
City Bel Air FEC ID number of contributing federal political committee.	State Zip Code MD 21014	07 27 2015 Transaction ID : A7640D4E138BB45AF9FC Amount of Each Receipt this Period 83.34
Name of Employer Harford Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Executive Vice President Aggregate Year-to-Date ▼ 666.67	-
Full Name (Last, First, Middle Initial) Mr. Steven D. Linkous Mailing Address 200 N Main St	•	Date of Receipt 07 27 2015
City Bel Air FEC ID number of contributing federal political committee.	State Zip Code MD 21014	Transaction ID: A42D5BAB6CA4F4697B16 Amount of Each Receipt this Period 208.26
Name of Employer Harford Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation President & CEO Aggregate Year-to-Date ▼ 1249.69	
Full Name (Last, First, Middle Initial) Mr. Joe Thesing Mailing Address PO Box 68700 City	State Zip Code	Date of Receipt 07 27 2015
Indianapolis FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran	State Zip Code IN 46268 C Occupation Vice President - State Affairs	Transaction ID : ACE4EE6DD2DC74F0F8E
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)		331.60
TOTAL This Period (last page this line numbe	r only)	

FOR LINE NUMBER: PAGE 67 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Charles M. Chamness Date of Receipt Mailing Address PO Box 68700 2015 27 City Zip Code State Transaction ID: AC69BF8C68FD3423B937 Indianapolis IN 46268 Amount of Each Receipt this Period FEC ID number of contributing 90.00 federal political committee. Name of Employer Occupation President & CEO National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 1350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Gregg A. Dykstra J.D. Date of Receipt Mailing Address 3601 Vincennes Rd 07 27 2015 City State Zip Code Transaction ID: A480D95841AC6455C877 IN Indianapolis 46268 Amount of Each Receipt this Period FEC ID number of contributing 96.16 federal political committee. Name of Employer Occupation National Association of Mutual Insuran Chief Operating Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 1442.40 Other (specify) Full Name (Last, First, Middle Initial) C. Mr. John Hair Date of Receipt Mailing Address 122 C St NW 07 27 2015 Ste 540 City Zip Code State Transaction ID: A9971FBB129E245E1A57 DC Washington 20001 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Federal Affairs Director National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 226.16 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOF	LINE	NU	MBER	:	PAGE	- (68 OF	:	107
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Detailed Summary Page	X	11a		11b		11c		12		
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	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Thomas Karol Mailing Address 122 C St NW Ste 540 City Washington FEC ID number of contributing	State Zip Code DC 20001	Date of Receipt 07 27 2015 Transaction ID : A6B6D89E1EF964CE8ABE Amount of Each Receipt this Period
federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	Occupation Federal Affairs Counsel Aggregate Year-to-Date ▼ 681.90	45.46
Full Name (Last, First, Middle Initial) Ms. Kristen Spriggs Mailing Address PO Box 68700 City	State Zip Code	Date of Receipt 07 27 2015 Transaction ID : A3BE179B307F74FEEAA7
Indianapolis FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran	Occupation Vice President - Member Development	Amount of Each Receipt this Period 20.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Jimi Grande Mailing Address 122 C St NW Ste 540 City Washington FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code DC 20001 C Occupation Senior Vice President-Federal and Poli Aggregate Year-to-Date ▼ 1704.60	Date of Receipt O7 27 2015 Transaction ID: A6320C8BF17FA4AD18F1 Amount of Each Receipt this Period 113.64
SUBTOTAL of Receipts This Page (optional)	>	179.10
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 69 OF 107 Use separate schedule(s) (check only one) X 11a 11b 12 11c 14 13 15 16

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Paul Tetrault Date of Receipt Mailing Address PO Box 68700 2015 27 City Zip Code State Transaction ID: A623672B1474547ABACC Indianapolis IN 46268 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation National Association of Mutual Insuran State & Policy Affairs Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Terry Suttner Date of Receipt Mailing Address PO Box 68700 07 27 2015 City State Zip Code Transaction ID: AB1FCF8BA3BC84CD8A77 IN Indianapolis 46268 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation National Association of Mutual Insuran Vice President - Membership/Insurance Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Irica Solomon Date of Receipt Mailing Address 122 C St NW 07 27 2015 Ste 540 City Zip Code State Transaction ID: A1978CF28570C494A858 DC Washington 20001 Amount of Each Receipt this Period FEC ID number of contributing 45.46 С federal political committee. Name of Employer Occupation Vice President of Federal and Politica National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 681.90 Other (specify) 105.46 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 70 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and State or for commercial purposes, other than using the na		
NAME OF COMMITTEE (In Full) National Association of Mutual Ins	surance Companies PAC	
Mutual of Enumclaw Insurance Company Receipt For: Primary General Other (specify) ▼	State Zip Code WA 98022 C Description General Counsel Aggregate Year-to-Date ▼ 520.85	Date of Receipt O7 28 2015 Transaction ID: A929147048E644E0E94D Amount of Each Receipt this Period 208.34
Mutual of Enumclaw Insurance Company	State Zip Code WA 98022 C Description Special Investigation Program Manager Aggregate Year-to-Date 214.20	Date of Receipt O7 28 2015 Transaction ID: A66EDD534062D40D7814 Amount of Each Receipt this Period 41.68
Mutual of Enumclaw Insurance Company	State Zip Code WA 98022 C Decupation President & CEO Aggregate Year-to-Date ▼ 2000.00	Date of Receipt 07 28 2015 Transaction ID: A4756DCF16F984131B8C Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)		500.02
TOTAL This Period (last page this line number onl	y)	

	FOR LINE NUMBER:					PAGE	. 7	71	OF	107	
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for each category of the Detailed Summary Page	>	11a		11b		11c		12			
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NAME OF COMMITTEE (In Full)

National Association of Mutu	ual Insurance Companies PAC	
Full Name (Last, First, Middle Initial) A. Mr. Rich Hawkins		Date of Receipt
Mailing Address 1460 Wells St		07 28 2015
City Enumclaw	State Zip Code WA 98022	Transaction ID : AA264A00D7A3E4029942 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	77.00
Name of Employer Mutual of Enumclaw Insurance Company	Occupation Vice President, Marketing	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 616.00	
Full Name (Last, First, Middle Initial) B. Mr. Steven C. Speicher	1	Date of Receipt
Mailing Address PO Box 30660	7.2.1	07 29 2015
City	State Zip Code	Transaction ID : A9F184AEA5F574DEFA93
Lansing	MI 48909	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Auto-Owners Insurance Company	Occupation Regional Vice President - Forest Regio	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) C. Mr. James C. Schumacher		Date of Receipt
Mailing Address PO Box 30660		07 29 2015
City Lansing	State Zip Code MI 48909	Transaction ID : A200DD288B02741DBAB Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer	Occupation	
Auto-Owners Insurance Company	Director - Agency Systems	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	336.00	
SUBTOTAL of Receipts This Page (options	al)	169.00
TOTAL This Period (last page this line nur	nber only)	

FOR LINE NUMBER: PAGE 72 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Jonathan R. Riekse Date of Receipt Mailing Address PO Box 30660 2015 City Zip Code State Transaction ID: A39920380B4894E959E6 Lansing MI 48909 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Senior Vice President, Personal Lines Receipt For: Aggregate Year-to-Date ▼ Primary General 666.64 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Daniel J. Thelen Date of Receipt Mailing Address PO Box 30660 07 29 2015 City State Zip Code Transaction ID: AAA5C5AD6CC4C4CE2848 MI Lansing 48909 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Senior Vice President of Human Resourc Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Diane Allen Date of Receipt Mailing Address 6101 Anacapri Blvd 07 29 2015 City State Zip Code Transaction ID: A15A215A4BE4E4AE1BB8 MI Lansing 48917 Amount of Each Receipt this Period FEC ID number of contributing 65.00 С federal political committee. Name of Employer Occupation Vice President-Personnel Auto-Owners Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) 223.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 73 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Kenneth Schroeder Date of Receipt Mailing Address PO Box 30660 2015 City Zip Code State Transaction ID: A2CB816B6DE494C7FA24 Lansing MI 48909 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Senior Vice President, Commercial Unde Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Lee Rademacher Date of Receipt Mailing Address PO Box 30660 07 29 2015 City State Zip Code Transaction ID: A3C7B04BF06214DBE85F MI Lansing 48909 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Vice President-Commercial Li Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Kraig T. Klopfenstein Date of Receipt Mailing Address PO Box 30660 07 29 2015 City Zip Code State Transaction ID: AFFBDC8F248BC40E890E MI Lansing 48909 Amount of Each Receipt this Period FEC ID number of contributing 75.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Sales/Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 155.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 74 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Barry Preslaski Date of Receipt Mailing Address PO Box 30660 2015 City Zip Code State Transaction ID: A26136F9D9F4F49CBA5A Lansing MI 48909 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Vice President **Auto-Owners Insurance Company** Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Kevin Barnes Date of Receipt Mailing Address PO Box 30660 07 29 2015 City State Zip Code Transaction ID: A8F85BDD225844CA1947 MI Lansing 48909 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Charles W. Drier Date of Receipt Mailing Address PO Box 3337 29 07 2015 City State Zip Code Transaction ID: ADABBA48EE9964B14B81 IL Peoria 61612 Amount of Each Receipt this Period FEC ID number of contributing 75.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 135.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page	×	11a		11b		11c		12	
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial) Mr. Mike Pike		Date of Receipt
Mailing Address PO Box 30660		07 29 2015
City	State Zip Code	Transaction ID : ACFE951A87EC744B684
Lansing	MI 48909	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer	Occupation	
Auto-Owners Insurance Company	Human Resources Professional	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	280.00	
Full Name (Last, First, Middle Initial) Ms. Cathy M. Adcock		Date of Receipt
Mailing Address PO Box 30660		07 29 _2015 _
City	State Zip Code	Transaction ID : AC8AE1383938C47289EI
Lansing	MI 48909	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer	Occupation	
Auto-Owners Insurance Company	Regional Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 680.00	
Full Name (Last, First, Middle Initial) . Ms. Alice Hamm		Date of Receipt
Mailing Address PO Box 30660		07 29 2015
City	State Zip Code	Transaction ID : A5CEFE0D06FB9481C90
Lansing	MI 48909	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	
Auto-Owners Insurance Company	Assistant Manager	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
	otional)	150.00

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Detailed Summary Page	X 11a 11b	11c 12									
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Companies PAC											

or	for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	
\rangle	NAME OF COMMITTEE (In Full) National Association of Mutual I	nsurance Companies PAC	
Α.	Full Name (Last, First, Middle Initial) Mr. Drew A. Klasing		Date of Receipt
	Mailing Address PO Box 30660		07 29 2015
	City	State Zip Code	Transaction ID : AB0D7DDBFEBFD46CAA9
	Lansing	MI 48909	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	45.00
	Name of Employer	Occupation	
	Auto-Owners Insurance Company	Manager, Home Office Claims	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	360.00	
	Full Name (Last, First, Middle Initial) Ms. Gayle Fisher		Date of Receipt
	Mailing Address PO Box 30660		07 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID : AE37C8F3C471B45FB9C9
	Lansing	MI 48909	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	85.00
	Name of Employer	Occupation	
	Auto-Owners Insurance Company	Assistant Vice President-Life Operatio	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	0.0	
	Other (specify) ▼	680.00	
	Full Name (Last, First, Middle Initial) Ms. Lisa M Ayotte		Date of Receipt
	Mailing Address PO Box 30660		07 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Lansing	State Zip Code MI 48909	Transaction ID: A6AD0CC7E0C8D4D18AD Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer	Occupation	
	Auto-Owners Insurance Company	Assistant Vice President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	336.00	
S	UBTOTAL of Receipts This Page (optional)		172.00
	OTAL This Period (last page this line number of		

FOR LINE NUMBER: PAGE 77 OF 107 Use separate schedule(s) (check only one) X 11a 11b 12 11c 13 14 15 16

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Carolyn B. Muller Date of Receipt Mailing Address PO Box 30660 2015 City Zip Code State Transaction ID: AED7600DEACE94A848EA Lansing MI 48909 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Name of Employer Occupation Senior Vice President - Claims **Auto-Owners Insurance Company** Receipt For: Aggregate Year-to-Date ▼ Primary General 680.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jon Jorgensen Date of Receipt Mailing Address PO Box 30660 07 29 2015 City State Zip Code Transaction ID: AAEADBE3F045D4677A36 MI Lansing 48909 Amount of Each Receipt this Period FEC ID number of contributing 35.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Vice President Underwriting Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Tim Lynch Date of Receipt Mailing Address PO Box 30660 07 29 2015 City State Zip Code Transaction ID: A631D40CDB25047BCBDB MI Lansing 48909 Amount of Each Receipt this Period FEC ID number of contributing 41.67 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Assistant Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 161.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FO	R LINE	NU	MBER	:	PAGE	7	'8 OI	F	10
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Any information copied from such Reports and or for commercial purposes, other than using t	I Statements may not be sold or used by any pers the name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Paul Otto Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909 C Occupation Vice President, Financial Accounting Aggregate Year-to-Date 400.00	Date of Receipt 07 29 2015 Transaction ID: A91C433E0799F4E82B0C Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) Mr. Andrew M. Eriksen Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909 C Occupation Assistant Vice President Aggregate Year-to-Date ▼ 800.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Diane Marshall Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909 C Occupation Manager Aggregate Year-to-Date ▼	Date of Receipt O7 29 2015 Transaction ID: A05F3574F73104BD89B7 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional).	•	250.00
TOTAL This Period (last page this line number	er only)	

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	and Statements may not be sold or used by any per g the name and address of any political committee	
NAME OF COMMITTEE (In Full)	5 - 1 - mile man manufacture of any pointed committee	
1	ual Insurance Companies PAC	
Full Name (Last, First, Middle Initial) A. Mr. Scott A. Michael		Date of Receipt
Mailing Address PO Box 30660		M = M / D = D / Y = Y = Y
City	State Zip Code	07
Lansing	MI 48909	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.00
Name of Employer	Occupation	
Auto-Owners Insurance Company	AVP - Personal Lines Auto	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	360.00	
Full Name (Last, First, Middle Initial) 3. Mr. Michael D. Baker	Date of Receipt	
Mailing Address PO Box 30660		07 29 _2015 _
City	State Zip Code	Transaction ID : AC574B68EF3434382B88
Lansing	MI 48909	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	-
Auto-Owners Insurance Company	Regional Vice President	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) C. Ms. Mary S. Pierce		Date of Receipt
Mailing Address PO Box 30660		Mam / Dab / Yayayay
		07 29 2015
City Lansing	State Zip Code MI 48909	Transaction ID: A7026BD9F7D5A43E8A37 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	58.33
Name of Employer	Occupation	+
Auto-Owners Insurance Company	Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	466.64	
SUBTOTAL of Receipts This Page (optional	al)	153.33
. 5 (1975)	· · · · · · · · · · · · · · · · · · ·	
TOTAL This Period (last page this line num	nber only)	7

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Ian R. Ward Date of Receipt Mailing Address PO Box 30660 2015 City Zip Code State Transaction ID: AAFE64B2404204440B0E Lansing MI 48909 Amount of Each Receipt this Period FEC ID number of contributing 70.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Senior Vice President, Investments and Receipt For: Aggregate Year-to-Date ▼ Primary General 560.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Sherry L. McKenzie AAM, AIS Date of Receipt Mailing Address PO Box 30660 07 29 2015 City State Zip Code Transaction ID: ABF1B611C35E04B37BA5 MI Lansing 48909 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify)

Full Name (Last, First, Middle Initial) **c.** Mr. William Woodbury Date of Receipt Mailing Address 6101 Anacapri Blvd 07 29 2015 City State Zip Code Transaction ID: A44E45EB77D4843869CD MI Lansing 48917 Amount of Each Receipt this Period FEC ID number of contributing 91.67 С federal political committee. Name of Employer Occupation SVP, Secretary & General Counsel **Auto-Owners Insurance Company** Receipt For: Aggregate Year-to-Date ▼ Primary General 733.36 Other (specify)

Name of Employer

Primary

Receipt For:

Auto-Owners Insurance Company

Other (specify)

General

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	FOF	R LINE	NU	MBER	:	PAGE	8	31 (OF	10
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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Jeffrey Tagsold Date of Receipt Mailing Address PO Box 30660 29 2015 City State Zip Code Transaction ID: AF440F5C02B714D9A856 MI Lansing 48909 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation President **Auto-Owners Insurance Company** Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. James J. Walsh Jr. Date of Receipt Mailing Address PO Box 30660 07 29 2015 City Zip Code State Transaction ID: A6E82EA6BB88646EEA62 MΙ 48909 Lansing Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee.

	Other (specify) ▼	400.00	
C.	Mr. Mark Wenger Mailing Address PO Box 30660		Date of Receipt 07 29 2015
	City Lansing	State Zip Code MI 48909	Transaction ID : A03894048E26D454882D Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	84.00
	Name of Employer	Occupation	
	Auto-Owners Insurance Company	Assistant Vice President and Chief P&C	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Filinary General		

Occupation

Vice President-Claims

Aggregate Year-to-Date ▼

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672.00

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		13		14		15	16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Rick W. Parks CPCU, AU. Date of Receipt Mailing Address PO Box 1029 30 2015 City Zip Code State Transaction ID: ACBA6A43E18664F0484F WI Fond du Lac 54936 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation President/CEO Society Insurance, a mutual co Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Todd E. Albert Date of Receipt Mailing Address PO Box 111 07 31 2015 City State Zip Code Transaction ID: A2FF3C076B9E64249BFF OH Bucyrus 44820 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company Chief Information Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. David Grove Date of Receipt Mailing Address PO Box 111 07 31 2015 City Zip Code State Transaction ID: AA88C25B5948947E7AA2 OH **Bucyrus** 44820 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Assistant Vice President Ohio Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 340.00 Other (specify)

FEC Schedule A (Form 3X) Rev. 02/2003

1050.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 83 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Theresa Jakubick Date of Receipt Mailing Address PO Box 111 2015 31 City Zip Code State Transaction ID: AD680A815C73B476A998 OH Bucyrus 44820 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company Project Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 340.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Mike Horvath CPCU Date of Receipt Mailing Address PO Box 111 07 31 2015 City State Zip Code Transaction ID: ABE69321D0E9E47E49BC OH Bucyrus 44820 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company Vice President-Human Resources Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Dona L. Mohr Date of Receipt Mailing Address 1725 Hopley Ave 07 31 2015 City Zip Code State Transaction ID: AC34C48FE8F574A589F4 OH **Bucyrus** 44820 Amount of Each Receipt this Period FEC ID number of contributing 45.00 С federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company Assistant Vice President-Quality Servi Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) 85.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Mark Coe Mailing Address PO Box 111 City Bucyrus FEC ID number of contributing federal political committee. Name of Employer Ohio Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code OH 44820 C Occupation IT Manager Aggregate Year-to-Date ▼ 663.00	Date of Receipt 07 31 2015 Transaction ID: A684167928B614F50BC0 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Mr. John F. Marazzo Mailing Address 2005 Market St Ste 1200 City Philadelphia FEC ID number of contributing federal political committee. Name of Employer Pennsylvania Lumbermens Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code PA 19103 C Occupation Vice President and Treasurer Aggregate Year-to-Date ▼ 300.00	Date of Receipt O7 31 2015 Transaction ID: A9887C7BB10204F37B01 Amount of Each Receipt this Period 40.00
Full Name (Last, First, Middle Initial) Mr. John F. Marazzo Mailing Address 2005 Market St Ste 1200 City Philadelphia FEC ID number of contributing federal political committee. Name of Employer Pennsylvania Lumbermens Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code PA 19103 C Occupation Vice President and Treasurer Aggregate Year-to-Date ▼ 300.00	Date of Receipt 07 31 2015 Transaction ID: AF616F7F4C6BA4C88A14 Amount of Each Receipt this Period 40.00
SUBTOTAL of Receipts This Page (optional)	•	119.00
TOTAL This Period (last page this line number	only)	

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Any information copied from such Reports and S	tatements may not be sold or used by any person	on for the purpose of soliciting contributions
or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) National Association of Mutual I	nsurance Companies PAC	
Full Name (Last, First, Middle Initial) A. Mr. Paul Sells		Date of Receipt
Mailing Address 2005 Market St		M = M / D = D / Y = Y = Y
Ste 1200	State 7in Code	07 31 2015
City Philadelphia	State Zip Code PA 19103	Transaction ID : A1B402C39C8A24134AAE
	10100	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	24.00
Name of Employer	Occupation	
Pennsylvania Lumbermens Mutual Insuran	Compensation Supervisor	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 346.00	
Full Name (Last, First, Middle Initial) Mr. Paul Sells Mailing Address 2005 Market St		Date of Receipt
Mailing Address 2005 Market St Ste 1200		07 31 _2015 _
City	State Zip Code	07 31 2015 Transaction ID : A76F98A8C69A64692A5C
Philadelphia	PA 19103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	24.00
Name of Employer	Occupation	
Pennsylvania Lumbermens Mutual Insuran	Compensation Supervisor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	346.00	
Full Name (Last, First, Middle Initial) Mr. John K. Smith CRM, CIC,		Date of Receipt
Mailing Address 2005 Market St Ste 1200		07 31 2015
City Philadelphia	State Zip Code PA 19103	Transaction ID : A02957557666C4CB4827 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	190.00
Name of Employer	Occupation	
Pennsylvania Lumbermens Mutual Insuran	President & CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1235.00	
SUBTOTAL of Receipts This Page (optional)		238.00
TOTAL This Period (last page this line number of	only)	

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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. John K. Smith CRM, CIC, Mailing Address 2005 Market St Ste 1200 City Philadelphia FEC ID number of contributing federal political committee. Name of Employer Pennsylvania Lumbermens Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code PA 19103 C Occupation President & CEO Aggregate Year-to-Date ▼	Date of Receipt O7 31 2015 Transaction ID: A09BA42622A224556BB4 Amount of Each Receipt this Period 190.00
Full Name (Last, First, Middle Initial) Mr. Shane Heeren Mailing Address PO Box 5626 City Rockford FEC ID number of contributing federal political committee. Name of Employer Rockford Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code IL 61125 C Occupation Director of Marketing & Sales Aggregate Year-to-Date ▼ 210.00	Date of Receipt 07 31 2015 Transaction ID : A54AA477A6E9A4212924 Amount of Each Receipt this Period 40.00
Full Name (Last, First, Middle Initial) Mr. Kent B. Shantz Mailing Address PO Box 5626 City Rockford FEC ID number of contributing federal political committee. Name of Employer Rockford Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code IL 61125 C Occupation COO Aggregate Year-to-Date ▼ 654.50	Date of Receipt 07 31 2015 Transaction ID : A51020118F59B42F2BB7 Amount of Each Receipt this Period 77.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	307.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 87 OF 107 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Joseph DeChatelets CPCU Date of Receipt Mailing Address PO Box 5626 2015 31 City Zip Code State Transaction ID: A81F4543D6A9243DB956 Rockford IL 61125 Amount of Each Receipt this Period FEC ID number of contributing 192.32 federal political committee. Name of Employer Occupation President & CEO Rockford Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 384.64 Other (specify) Full Name (Last, First, Middle Initial) **B.** Mr. William Hanby Date of Receipt Mailing Address PO Box 5626 07 31 2015 City State Zip Code Transaction ID: A1349EC3503AE4AE5871 Rockford IL 61125 Amount of Each Receipt this Period FEC ID number of contributing 38.46 federal political committee. Name of Employer Occupation Rockford Mutual Insurance Company Chief Information Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 316.92 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Berto Sciolla Date of Receipt Mailing Address PO Box 10350 07 31 2015 City Zip Code State Transaction ID: ADDEF0C05B22B4180992 CT Stamford 06904 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation General Reinsurance Corporation Regional Manager - NA Treaty Reinsuran Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 730.78 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FC	R LINE	NU	IMBER	:	PAGE	: 8	38 OF	107
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Jami Kelly Date of Receipt Mailing Address One Mutual Avenue 31 2015 City State Zip Code Transaction ID: AFF4096AE26674CD6B30 Frankenmuth MI 48787 Amount of Each Receipt this Period FEC ID number of contributing 39.00 federal political committee. Name of Employer Occupation Vice President Frankenmuth Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 624.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Randall Trinklein Date of Receipt Mailing Address One Mutual Avenue 07 31 2015 City State Zip Code Transaction ID: AF282C75BCCE044D4A3D Frankenmuth MI 48787 Amount of Each Receipt this Period FEC ID number of contributing 39.00 federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President of Administration Receipt For: Aggregate Year-to-Date ▼ Primary General 624.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Phil McCain Date of Receipt Mailing Address One Mutual Avenue 07 31 2015 City State Zip Code Transaction ID: A04003C3A0710463C853 MI Frankenmuth 48787 Amount of Each Receipt this Period FEC ID number of contributing 38.47 С federal political committee.

116.47 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

615.52

Occupation Vice President, IT

Aggregate Year-to-Date ▼

Name of Employer

Primary

Other (specify)

Receipt For:

Frankenmuth Mutual Insurance Company

General

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Any information copied from such Reports and	Statements may not be sold or used by any pers	on for the purpose of soliciting contributions
or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Don W. Blackwell Mailing Address 2005 Market St Ste 1200 City Philadelphia FEC ID number of contributing	State Zip Code PA 19103	Date of Receipt 07 31 2015 Transaction ID : A19B425E4F13F46EDBF7 Amount of Each Receipt this Period
federal political committee. Name of Employer Indiana Lumbermens Mutual Insurance Co Receipt For: Primary General Other (specify) ▼	Occupation Secretary & Treasurer Aggregate Year-to-Date ▼ 300.00	40.00
Full Name (Last, First, Middle Initial) Mr. Don W. Blackwell Mailing Address 2005 Market St Ste 1200 City Philadelphia	State Zip Code PA 19103	Date of Receipt 07 31 2015 Transaction ID : AA138AD85218640A5BCC Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Indiana Lumbermens Mutual Insurance Co Receipt For: Primary General	Occupation Secretary & Treasurer Aggregate Year-to-Date ▼	40.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Sherry Kidwell Mailing Address PO Box 111 City Bucyrus	State Zip Code OH 44820	Date of Receipt 07 31 2015 Transaction ID: A55E2F817BD954BDC993 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer United Ohio Insurance Company Receipt For: Primary General Other (specify)	Occupation Manager of Application Aggregate Year-to-Date ▼ 340.00	20.00
SUBTOTAL of Receipts This Page (optional)		100.00
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	FOF	R LINE	NU	MBER	:	PAGE	90 OF	-	107
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Fred A. Edmond CPCU, CIC Date of Receipt Mailing Address One Mutual Avenue 31 2015 City State Zip Code Transaction ID: A38179BE68B444DBEA1F MI Frankenmuth 48787 Amount of Each Receipt this Period FEC ID number of contributing C 77.00 federal political committee. Name of Employer Occupation President & COO Frankenmuth Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 1232.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John S. Benson Date of Receipt Mailing Address One Mutual Avenue 07 31 2015 City State Zip Code Transaction ID: AED3DA185ABCD49B98AE Frankenmuth MI 48787 Amount of Each Receipt this Period FEC ID number of contributing 117.00 federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Chairman & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General

Other (specify) ▼	1872.00	
Full Name (Last, First, Middle Initial) Mr. Andrew Knudsen Mailing Address One Mutual Avenue		Date of Receipt 07 31 2015
City Frankenmuth	State Zip Code MI 48787	Transaction ID: A22AFB577976D4AE1B38 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.00
Name of Employer	Occupation	
Frankenmuth Mutual Insurance Company Receipt For: Primary General Other (specify)	Vice President, Claims Aggregate Year-to-Date ▼ 608.00	

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232.00

C.

	FOF	R LINE	NU	IMBER	:	PAGE	. (91 OF	:	107
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	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Brian S. McLeod Mailing Address One Mutual Avenue City Frankenmuth FEC ID number of contributing federal political committee. Name of Employer Frankenmuth Mutual Insurance Company	State Zip Code MI 48787 C Occupation Vice President, Secretary & Treasurer	Date of Receipt 07 31 2015 Transaction ID: A8894C125DBB341DEA4F Amount of Each Receipt this Period 38.50
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 616.00	
Full Name (Last, First, Middle Initial) 3. Mr. Bryan Gilleland Mailing Address One Mutual Avenue City	State Zip Code	Date of Receipt 07 31 2015 Transaction ID : AFD181567285B4A69BC1
Frankenmuth FEC ID number of contributing federal political committee. Name of Employer	MI 48787 C Occupation	Amount of Each Receipt this Period 38.47
Frankenmuth Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Senior Vice President Aggregate Year-to-Date ▼ 615.52	
Full Name (Last, First, Middle Initial) Mailing Address City	State Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer	Occupation Occupation	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	>	76.97
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S	CHEDULE A (FEC Form 3X)						NUM		R: PAG	E 92 (OF 107					
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or	for commercial purposes, other than using the	name and a	address of any political committee	to :	solic	it cor	ntributi	ions	from sucl	1 commi	ttee.					
	Name of committee (In Full) National Association of Mutual In	nsurance	e Companies PAC													
Α.	Full Name (Last, First, Middle Initial) American Family Mutual Insurance Co	mpany Fe	deral PAC (AMFAM PAC)		Da	ite of	Rece	eipt								
	Mailing Address 6000 American Parkway				IV	1 = M	/	D I		YYY	Y					
	City	State	Zip Code	\dashv	4	07 rans	action	20 n ID	: A4DF66	2015	MOCE9A0					
	Madison	WI	53783						Receipt th							
	FEC ID number of contributing federal political committee.	C co	0354290			Ξ				-	0.00					
	Name of Employer	Occupation	1													
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	Primary General		2000.00	П												
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	City	State	Zip Code							_						
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	federal political committee.	C			Н	-	7		7		K					
	Name of Employer	Occupation	1													
	Receipt For:	Aggragata	Voor to Data W	-												
	Primary General	Aggregate	Year-to-Date ▼													
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<u>с</u> .	Full Name (Last, First, Middle Initial)				Г.	to -	. Da	in.								
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	City	Zip Code	_	Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.		Amount of Each recorp					, 1000.pt 11								
	Name of Employer	\dashv														
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	Primary General	55. 594.0	Year-to-Date ▼													
	Other (specify) ▼															
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l °	SUBTOTAL of Receipts This Page (optional)		······				7		7	تنب						

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 93 OF 107 (check only one)						
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		Detailed Summary Page	13 14 X 15 16 17						
Any information copied from such Repo	rts and Statements ma	ay not be sold or used by any p	person for the purpose of soliciting contributions						
	using the name and a	address of any political committe	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) National Association of M	lutual Incurance	Companies PAC							
National Association of iv	iutuai irisurarice	e Companies i AC							
Full Name (Last, First, Middle Initial) A. NAMIC Administrative Fund			Date of Receipt						
Mailing Address 3601 Vincennes Rd			M = M / D = D / Y = Y = Y						
City	State	Zip Code	07 23 2015 Transaction ID : ACFF13535EE5948F49BA						
Indianapolis	IN	46268-1154	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		311.17						
•	Occupation		Reimb. of bank fees						
Name of Employer	Occupation	I							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General	7.1991.094.10		7						
Other (specify)		1078.97							
Full Name (Last, First, Middle Initial)									
B. Mailing Address			Date of Receipt						
Mailing Address									
City	State	Zip Code							
	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С								
Name of Employer	Occupation	1							
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Primary General	Aggregate	Teal-10-Date ▼	1						
Other (specify) ▼									
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City	State	Zip Code							
			Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C								
Name of Employer	Occupation								
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Primary General	7.55.594.6		1						
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s)	FOR LINE NUMBER: PAGE 94 OF 107 (check only one)							
		for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 15 16 X 17							
				person for the purpose of soliciting contributions e to solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full) National Association of Mutua	ıl Insurance	e Companies PAC							
Α.				Date of Receipt						
	Mailing Address 8751 Michigan Rd			07 31 _ 2015 _						
	City	State	Zip Code	Transaction ID : A5FB340E3EB6C4E6CA3						
	Indianapolis FEC ID number of contributing	IN	46268-3141	Amount of Each Receipt this Period						
	federal political committee.	C		1.55						
	Name of Employer	Occupation	1	Bank Interest						
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		31.00	1						
_	Full Name (Last, First, Middle Initial)		, , , , , , , , , , , , , , , , , , , ,							
В.	B. Chase Bank			Date of Receipt						
	Mailing Address 8751 Michigan Rd			07 31 _2015 _						
	City	State	Transaction ID : A8C1A8484B7FE4B76AFE							
	Indianapolis	IN	46268-3141	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		0.07						
	Name of Employer	Occupation	1	Bank Interest						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 31.00]						
— С.	Full Name (Last, First, Middle Initial)			Date of Receipt						
C.	Mailing Address			Mam / Dad / Yayayay						
	City	State	Zip Code	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		Amount of Each recept this renou						
	Name of Employer	Occupation	n							
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s	UBTOTAL of Receipts This Page (optional).			1.62						
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Office Sought: House	PAGE 95 OF 107				
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) A. Chase Bank Mailing Address 8751 Michigan Rd City Indianapolis IN 46268-3141 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: House President State: District: Full Name (Last, First, Middle Initial) B. American Express Mailing Address PO Box 981540 City El Paso Toresident Senate President Senate President Credit Card Processing Fees Candidate Name Office Sought: House Disbursement For: Senate Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: House Disbursement Credit Card Processing Fees Candidate Name Office Sought: House Disbursement For: Senate President Senate President Disbursement For: Senate President Senate President Disbursement For: Senate President Disbursement For: Senate President Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) C. American Express Mailing Address PO Box 981540 City State Zip Code Tx 79998-1540 Transaction ID : BC6F72BDBFB81 Transaction ID : BC6F72BDBFB81 Transaction ID : BC6F72BDBFB81 Transaction ID : BC6F72BDBFB81 Amount of Each Disbursement Disbursement Credit Card Processing Fee					
NAME OF COMMITTEE (in Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) A. Chase Bank Mailing Address 8751 Michigan Rd City Indianapolis Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: President State: District: Full Name (Last, First, Middle Initial) B. American Express Mailing Address PO Box 981540 City El Paso Tx 79998-1540 Credit Card Processing Fees Candidate Name Office Sought: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State El Paso Tx 79998-1540 Category/ Type Date of Disbursement Credit Card Processing Fees Candidate Name Category/ Type Date of Disbursement Category/ Type Transaction ID : BBB8E7A0228FA Amount of Each Disbursement Category/ Type Transaction ID : BBB8E7A0228FA Amount of Each Disbursement Category/ Type Date of Disbursement this I Transaction ID : BBB8E7A0228FA Amount of Each Disbursement Category/ Type Date of Disbursement this I Transaction ID : BBB8E7A0228FA Amount of Each Disbursement Type Category/ Type Transaction ID : BBB8E7A0228FA Amount of Each Disbursement Type Type Date of Disbursement Type Type Transaction ID : BC6F72BDBFB8I					
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City State Zip Code Indianapolis IN 46268-3141 Purpose of Disbursement Credit Card Processing Fees Candidate Name Disbursement For: President State: District: Full Name (Last, First, Middle Initial) Credit Card Processing Fees Mailing Address PO Box 981540 Date of Disbursement For: Credit Card Processing Fees District: Full Name (Last, First, Middle Initial) Credit Card Processing Fees Category/ Type Date of Disbursement Transaction ID: BBB8E7A0228FA Amount of Each Disbursement Date of Disbursement Transaction ID: BBB8E7A0228FA Transaction ID: BBB8E7A0228FA Amount of Each Disbursement Credit Card Processing Fees Category/ Type Transaction ID: BBB8E7A0228FA Amount of Each Disbursement this I Date of Disbursement Credit Card Processing Fees Category/ Type Transaction ID: BBB8E7A0228FA Amount of Each Disbursement this I Date of Disbursement ID: BBB8E7A0228FA Amount of Each Disbursement ID: BC6F72BDBFB8I City State Zip Code TX 79998-1540 Date of Disbursement Transaction ID: BC6F72BDBFB8I Transaction ID: BC6F72BDBFB8I Transaction ID: BC6F72BDBFB8I Amount of Each Disbursement Ibis II Date of Disbursement Transaction ID: BC6F72BDBFB8I					
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Indianapolis Purpose of Disbursement Credit Card Processing Fees Candidate Name Disbursement For: Senate President Credit Card Processing Fees Category/ Type Date of Disbursement Credit Card Processing Fees Date of Disbursement Credit Card Processing Fees Category/ Type 12C Date of Disbursement Date of Disbursement Transaction ID: BB1AD71BA7EE. Amount of Each Disbursement this II Category/ Type 12C Date of Disbursement Date of Disbursement Transaction ID: BB1AD71BA7EE. Amount of Each Disbursement this II Category/ Type Transaction ID: BB1AD71BA7EE. Amount of Each Disbursement this II Category/ Type Transaction ID: BB1AD71BA7EE. Amount of Each Disbursement this II Category/ Type Transaction ID: BB1AD71BA7EE. Amount of Each Disbursement Category/ Type Transaction ID: BB1AD71BA7EE. Amount of Each Disbursement this II Category/ Type Transaction ID: BB1AD71BA7EE. Amount of Each Disbursement this II Category/ Type Transaction ID: BB1AD71BA7EE. Amount of Each Disbursement this II Category/ Type Transaction ID: BB1AD71BA7EE. Amount of Each Disbursement this II Category/ Type Transaction ID: BB1AD71BA7EE. Amount of Each Disbursement this II Category/ Type Transaction ID: BB1AD71BA7EE. Amount of Each Disbursement this II Transaction ID: BB1AD71BA7EE. Transaction ID: BB1AD71BA					
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Credit Card Processing Fees Candidate Name Category/ Office Sought: House Senate Primary General President State: District: Full Name (Last, First, Middle Initial) B. American Express Mailing Address PO Box 981540 City State Zip Code TX 79998-1540 Credit Card Processing Fees Candidate Name Category/ Type Transaction ID: BBB8E7A0228FA Amount of Each Disbursement to Transaction ID: BBB8E7A0228FA Amount of Each Disbursement Initial Transaction ID: BBB8E7A0228FA Amount of Each Disbursement ID: Disbursement For: Senate Primary General Primary General Other (specify) ▼ Date of Disbursement Transaction ID: BC6F72BDBFB8I Transaction ID: BC6F72BDBFB8I Amount of Each Disbursement Transaction ID: BC6F72BDBFB8I Amount of Each Disbursement Initial Transaction ID: BC6F72BDBFB8I					
Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) B. American Express Mailing Address PO Box 981540 City State Zip Code El Paso TX 79998-1540 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: House Primary General Other (specify) ▼ Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) C. American Express Mailing Address PO Box 981540 City State Zip Code TX 79998-1540 Disbursement For: Disbursement For: Type Office Sought: President Other (specify) ▼ Date of Disbursement this Interval Disbursement For: Type Office Sought: President Disbursement Type	ch Disbursement this Period				
Office Sought: House	120.84				
Senate President Other (specify) ▼ State: District: Other (specify) ▼ Full Name (Last, First, Middle Initial) B. American Express Mailing Address PO Box 981540 City State Zip Code TX 79998-1540 Purpose of Disbursement Credit Card Processing Fees Candidate Name Category/ Type Office Sought: House Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) C. American Express Mailing Address PO Box 981540 City State Zip Code Transaction ID: BBB8E7A0228FA Amount of Each Disbursement this ID Date of Disbursement Tor: Full Name (Last, First, Middle Initial) C. American Express Mailing Address PO Box 981540 City State Zip Code Transaction ID: BC6F72BDBFB8I Transaction ID: BC6F72BDBFB8I Transaction ID: BC6F72BDBFB8I Transaction ID: BC6F72BDBFB8I Amount of Each Disbursement this ID Date of Disbursement ID: BC6F72BDBFB8I Transaction ID: BC6F72BDBFB8I Amount of Each Disbursement Credit Card Processing Fee					
State: District: Full Name (Last, First, Middle Initial) B. American Express Mailing Address PO Box 981540 City State Zip Code El Paso TX 79998-1540 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ State: District: Date of Disbursement Transaction ID: BBB8E7A0228FA Amount of Each Disbursement this I Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) C. American Express Mailing Address PO Box 981540 Date of Disbursement this I Date of Disbursement this I Transaction ID: BC6F72BDBF88I Transaction ID: BC6F72BDBF88I Amount of Each Disbursement this I Amount of Each Disbursement this I Transaction ID: BC6F72BDBF88I Amount of Each Disbursement this I Amount of Each Disbursement this II					
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Candidate Name Category/ Type 19	19.50				
Office Sought: House Disbursement For:	7				
Senate Primary General					
State: District: Other (specify) ▼					
2.0					
SUBTOTAL of Disbursements This Page (optional)	148.29				
TOTAL This Period (last page this line number only)					

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			PAGE	96 C)F 107		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	le(s) (check only one)			7.65		
	Detailed Summary Page	X 211	b 22 28a	23 28b	24 28c	25 29	26 30b
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NAME OF COMMITTEE (In Full)	_						
National Association of Mutual Ins	urance Companies	PAC					
Full Name (Last, First, Middle Initial)			5.				
A. Aristotle				f Disbursem			
Mailing Address 205 Pennsylvania Ave SE			07	10		2015	Y
City	State Zip Code		Trans	saction ID : I	B280AADE	F015F24	1CD085F
Washington Purpose of Disbursement	DC 20003-1164			34011011 12 . 1	D200AAD1	01012	,OD0001
Credit Card Processing Fees			Amoun	t of Each Di	isbursemer	nt this F	Period
Candidate Name		Category/				22	.75
Office Sought: House Disburse	mant Fam	Type		7	7	23	.73
Office Sought: House Disburse Senate	ment For: Primary General						
President	Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial)			D. I.	(D'alamana			
B. Aristotle				f Disbursem		Y	V
Mailing Address 205 Pennsylvania Ave SE			07	31		2015	Y
City Washington	State Zip Code DC 20003-1164		Trans	saction ID :	B0388316	3607141	IBE8FC
Purpose of Disbursement Credit Card Processing Fees			Amoun	t of Each Di	isbursemer	nt this F	Period
Candidate Name		Category/					-
		Type				10	.00
Office Sought: House Disburse Senate	ment For: Primary General						
President	Other (specify)						
State: District:	, , , , , , , , , , , , , , , , , , ,						
Full Name (Last, First, Middle Initial)							
C.				f Disbursem			
Mailing Address			M = M	/ D D	/ Y	Y	Y
City	State Zip Code						
Purpose of Disbursement			\perp				
		Amoun	t of Each Di	isbursemer	nt this F	Period	
Candidate Name		Category/ Type					
	ment For:			7	- 7		
Senate	Primary General						
President State: District:	Other (specify) ▼						
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SUBTOTAL of Disbursements This Page (optional).				1 (0)		33.	75
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TOTAL This Period (last page this line number only	/)	·····•		-	7	182.	.04

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	EMIZED DISBURSEMENTS	Use separate schedule(s) (check	LINE NUMBER: PAGE 97 OF 107 k only one)
. 1		for each category of the Detailed Summary Page) `	21b 22 23 24 25 26
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or	for commercial purposes, other than using the name	ne and address of any pol	itical committ	tee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)	_		
$ \rangle$	National Association of Mutual Insu	urance Companies	PAC	
\angle	Full Name (Last, First, Middle Initial)			
Α.	Elect Karen Fann Committee			Date of Disbursement
				M M / D D / Y Y Y Y
	Mailing Address 5691 Hole in One Drive			07 07 2015
	City	State Zip Code		
	Prescott	AZ 86301-8109		Transaction ID: B5DB555B2A53E42D6A30
	Purpose of Disbursement			_
	Political Contribution			Amount of Each Disbursement this Period
	Candidate Name		Categor	y/ 500.00
	Office Cought		Type	300.00
		nent For: 2016 Primary General		
	President	Other (specify)		
	State: District:	- · · · · (-p-o)/ ▼		
	Full Name (Last, First, Middle Initial)			
В.				Date of Disbursement
				M = M / D = D / Y = Y = Y
	Mailing Address 3232 McKinney Ave Suite 660			07 07 2015
	City S Dallas	State Zip Code TX 75204-8584		Transaction ID : B9DC83648C83C47228A0
	Purpose of Disbursement	73204-0004		_
	Political Contribution			Amount of Each Disbursement this Period
	Candidate Name		Category	y/ 500.00
	2"		Туре	500.00
		nent For: 2016		
	Senate X	Primary General Other (specify)		
	State: District:	onioi (opoony) ▼		
_	Full Name (Last, First, Middle Initial)			
C.	Friends of Rich Golick			Date of Disbursement
				M M / D D / Y Y Y Y
	Mailing Address 2372 Simpson Farm Way		07 07 2015	
	City S	State Zip Code		
	Smyrna	GA 30080-4626		Transaction ID : B8E1150CC84014F0AB76
	Purpose of Disbursement			
	Political Contribution			Amount of Each Disbursement this Period
	Candidate Name		Categor	y/ 500.00
	Office Sought: House Disburser	ment For: 2016	Туре	
	Senate Disburser	Primary General		
	President	Other (specify)		
	State: District:	• • • • •		
s	UBTOTAL of Disbursements This Page (optional)			1500.00
ΙT	OTAL This Period (last page this line number only)			 I + + + + + + + + + + + + + + + + + + +

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 98 OF						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c X 29 30b					
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NAME OF COMMITTEE (In Full)								
$\Big angle$ National Association of Mutual In	surance Companies F	PAC						
Full Name (Last, First, Middle Initial)								
A. Committee to Re-Elect John Mea	idows		Date of Disbursement					
Mailing Address PO Box 1255			07 07 2015					
City	State Zip Code		Transaction ID : B6304C70A57B147EC901					
Calhoun Purpose of Disbursement	GA 30703-1255		Transaction in . Bosoto road in the Losot					
Political Contribution			Amount of Each Disbursement this Period					
Candidate Name		Category/	500.00					
		Туре	500.00					
Office Sought: House Disburs Senate President	sement For: 2016 Primary General Other (specify)							
State: District:	Canon (openally)							
Full Name (Last, First, Middle Initial)								
B. B.J. Pak for State House			Date of Disbursement					
Mailing Address 1034 Morgan Garner Drive		07 07 2015						
City Lilburn	State Zip Code GA 30047-5478		Transaction ID : B86B781B1764A4AC1BE1					
Purpose of Disbursement Political Contribution			Amount of Each Disbursement this Period					
Candidate Name		Category/ Type	500.00					
	sement For: 2016 ✓ Primary General Other (specify) ▼							
Full Name (Last, First, Middle Initial)								
C. Committee to Elect Tom Rice			Date of Disbursement					
Mailing Address 11213 Brookhaven Club Drive			07 07 2015					
City Johns Creek	State Zip Code GA 30097		Transaction ID : BA377507CE8BC4B2D8B4					
Purpose of Disbursement Political Contribution	30007							
Candidate Name		Category/ Type	Amount of Each Disbursement this Period 500.00					
Office Sought: House Disburs	sement For: 2016 Primary General Other (specify) ▼	71.						
SUBTOTAL of Disbursements This Page (optional			1500.00					
TOTAL This Period (last page this line number or	lly)							

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c X 29 30b
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NAME OF COMMITTEE (In Full)	, ,		
National Association of Mutual Insu	ırance Companies F	PAC	
Full Name (Last, First, Middle Initial)			
A. Committee to Re-Elect Carolyn Hug	gley		Date of Disbursement
Mailing Address P.O. Box 6342			07 07 2015
•	State Zip Code		Transaction ID : B38C015CE516A460FBBF
Columbus Purpose of Disbursement	GA 31917-6342		
Political Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	500.00
000	1.5	Type	500.00
Senate	nent For: 2016 Primary General Other (specify)		
State: District:	, , , , , , , , , , , , , , , , , , ,		
Full Name (Last, First, Middle Initial)			
B. People for Barry Fleming			Date of Disbursement
Mailing Address 507 Canterbury Court			07 07 2015
,	State Zip Code GA 30814-5085		Transaction ID : B5D039AF84DFE447CBC
Political Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	500.00
Senate	nent For: 2016 Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial)			Date of Disbursement
C. Williamson for Walton			M M / D D / Y Y Y Y
Mailing Address Post Office Box 430			07 07 2015
,	State Zip Code GA 30655-0430		Transaction ID : B8FCB473067B14455948
Purpose of Disbursement Political Contribution			
Candidate Name		Category/ Type	Amount of Each Disbursement this Period 250.00
Senate	nent For: 2016 Primary General Other (specify)	75-	
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).			1250.00

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IT	EMIZED DISBURSEMENTS	for each cate		(check only	one)	23	24	25	<u>26</u>
		Detailed Sur	nmary Page	27	28a	28b	28c >		30b
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Ļ	NAME OF COMMITTEE (In Full)		. J. any pointe	30.111111100 10	20010 001			J	
$ \rangle$	National Association of Mutual Insu	ırance Coı	mpanies F	PAC					
_	Full Name (Last, First, Middle Initial)				· ·	D: 1			
Α.	Vote Livingston				Date of	Disburser		Y	V
	Mailing Address 9559 W Menadota Dr				07	07		2015	
			p Code		Transa	action ID :	B40F638D6	63E6E4	AF8B8D
	Peoria Purpose of Disbursement	AZ 8	5382-4196						
	Political Contribution				Amount	of Each [Disbursemer	nt this P	eriod
	Candidate Name			Category/				500.	00
	Office Sought: House Disburser	nent For: 201	<u> </u>	Туре		7			
		Primary	General						
	President	Other (specify)	▼						
_	State: District: Full Name (Last, First, Middle Initial)								
В.	,					Disburser			
	Mailing Address 755 River Gate Drive		07	07		2015	Y		
	Sandy Springs		p Code 0350-4621		Trans	action ID	B6046C6E	8A0234	612978
	Purpose of Disbursement Political Contribution				Amount	of Each [Disbursemer	nt this P	eriod
	Candidate Name			Category/ Type				500	.00
		nent For: 201	6	71		,			
	Senate X	Primary Other (specify)	General						
	State: District:	Other (specify)	•						
_	Full Name (Last, First, Middle Initial)				_				
C.	Committee to Elect Howard Maxwe	ell				Disburser			
	Mailing Address 716 Graham Road			07	07		2015	Y	
	•		p Code 0132-7469		Trans	action ID :	B1D707B1	75E7F4	D9795F
	Purpose of Disbursement Political Contribution								
	Candidate Name			Category/ Type	Amount	of Each [Disbursemer	t this P	
	Office Sought: House Disburser	nent For: 201	<u> </u> 6	туре			-		
	Senate	Primary	General						
	President State: District:	Other (specify)	▼						
	otato. District.								
s	SUBTOTAL of Disbursements This Page (optional)							1500.	00
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c X 29 30b
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NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , ,		
National Association of Mutual Inst	urance Companies	PAC	
Full Name (Last, First, Middle Initial)			
A. Committee to Elect Richard Smith			Date of Disbursement
Mailing Address Post Office Box 2122			07 07 2015
City	State Zip Code		Transaction ID : B83BB272AC68D4A5BA06
Columbus Purpose of Disbursement	GA 31902-2122		Transaction is . Soosser Processor
Political Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	500.00
		Type	500.00
Office Sought: House Disburse Senate President	ment For: 2016 Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial)			
B. Re-Elect Debbie Lesko			Date of Disbursement
Mailing Address PO Box 5292			07 08 2015
City Peoria Purpose of Disbursement	State Zip Code AZ 85385-5292		Transaction ID: B5F23621B9FCA4D0CB97
Political Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	500.00
	ment For: 2016 Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			
C. Committee to Elect Butch Miller			Date of Disbursement
Mailing Address 4734 Arapahoe Trail		07 08 7 2015	
City Gainesville	State Zip Code GA 30506-2797		Transaction ID : BB9DA29AA168C491FBD
Purpose of Disbursement			
Political Contribution Candidate Name		Category/ Type	Amount of Each Disbursement this Period 500.00
Office Sought: House Disburse	ment For: 2016 Primary General Other (specify)	туре	
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only			1500.00

S	CHEDULE B (FEC Form 3X)			EOD LINE N	NUMBER: PAGE 102 OF 107	
ITEMIZED DISBURSEMENTS		Use separate schedule(s)				
11	LIVIIZED DISBURSLIVIENTS	for each category of the Detailed Summary Page		21b	22 23 24 25 26	
_		Detailed Summary Page	_	27	28a 28b 28c X 29 30b	
	y information copied from such Reports and Stater					
	for commercial purposes, other than using the name					
	NAME OF COMMITTEE (In Full)					
$ \rangle$	National Association of Mutual Insu	urance Companies	s PA	VC		
\angle	Full Name (Last, First, Middle Initial)			<u> </u>		
A.	Bethel for Georgia Senate				Date of Disbursement	
	Detrier for Georgia Geriate				M M / D D / Y Y Y Y	
	Mailing Address 1701 Briarcliff Circle				07 08 2015	
	-					
	City S	State Zip Code GA 30720-5184			Transaction ID: B1B9E488B96A1483ABAE	
	Purpose of Disbursement	30/20-3104	1			
	Political Contribution				Amount of Each Disbursement this Period	
	Candidate Name			Category/		
			<u> </u>	Type	500.00	
		ment For: 2016				
		Primary General				
	State: District:	Other (specify) ▼				
_	Full Name (Last, First, Middle Initial)					
В.	John Frullo Campaign				Date of Disbursement	
					M M / D D / Y Y Y Y	
	Mailing Address 4024 75th Street				07 08 2015	
	City S Lubbock	State Zip Code TX 79423-1108			Transaction ID : B288A06274685480F899	
	Purpose of Disbursement	79423-1108	1			
	Political Contribution				Amount of Each Disbursement this Period	
	Candidate Name			Category/	4500.00	
				Type	1500.00	
		ment For: 2016				
	Senate X	Primary General				
	State: District:	Other (specify) ▼				
_	Full Name (Last, First, Middle Initial)					
	Cowsert for Senate				Date of Disbursement	
					M M / D D / Y Y Y Y	
	Mailing Address P.O. Box 627				07 08 2015	
	City	Ctata Zin Cada				
	City S Athens	State Zip Code GA 30603-0627			Transaction ID: B7182E1240E864B718DD	
	Purpose of Disbursement	23000 0021	T			
	Political Contribution				Amount of Each Disbursement this Period	
	Candidate Name		7	Category/	500.00	
	05			Type	500.00	
	Office Sought: House Disburser Senate	ment For: 2016 Primary General	I			
	President	Primary General Other (specify) ▼	ı			
	State: District:	(Specif)				
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS			EOD I	FOR LINE NUMBER: PAGE 103 OF 107		
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	for commercial purposes, other than using the name					
	NAME OF COMMITTEE (In Full)					
$ \rangle$	National Association of Mutual Insu	rance Companies	PAC			
			. ,			
Ξ	Full Name (Last, First, Middle Initial)					
Α.	Committee to Elect Josh McKoon			Date of Disbursement		
	M. W. All D.			M M / D D / Y Y Y Y		
	Mailing Address P.O. Box 2565			07 08 2015		
	City State Zip Code					
	Columbus	GA 31902-2565		Transaction ID : BCBA8E7D1C8A84FC8A7		
	Purpose of Disbursement			_		
	Political Contribution		' '	Amount of Each Disbursement this Period		
	Candidate Name		Category	7		
			Type	500.00		
	Office Sought: House Disburser	nent For: 2016				
		Primary General				
	President	Other (specify) ▼				
_	State: District:					
_	Full Name (Last, First, Middle Initial)					
В.	P. K. Martin for State Senate			Date of Disbursement		
	M.W. All			M M / D D / Y Y Y Y		
	Mailing Address 455 Pine Forest Dr			07 08 2015		
	City	State Zip Code				
	Lawrenceville	GA 30046-6000		Transaction ID : B25F72745230746E2922		
	Purpose of Disbursement			7		
	Political Contribution		1	Amount of Each Disbursement this Period		
	Candidate Name		Category	250.00		
			Туре	250.00		
		ment For: 2016				
	Senate President	Other (appoint) — General				
	State: District:	Other (specify) ▼				
_	Full Name (Last, First, Middle Initial)					
_	David Shafer Senate Committee			Date of Disbursement		
٠.	David Stidler Seriale Committee					
	Mailing Address Post Office Box 880			07 08 2015		
	2					
	City	State Zip Code		Transaction ID : B02A01F33DCC9415F923		
	Duluth Dishusers of Dishusers of	GA 30096				
	Purpose of Disbursement Political Contribution			7		
	Candidate Name			Amount of Each Disbursement this Period		
	Candidate Name		Category Type	500.00		
	Office Sought: House Disburser	ment For: 2016	туре			
	Senate Stage	Primary General				
	President	Other (specify)				
	State: District:	V 1 = = 37 - ▼				
Г	l					
s	UBTOTAL of Disbursements This Page (optional)			1250.00		
H	J (p =/					
Ī	OTAL This Period (last nage this line number only)					

SCHEDULE B (FEC Form 3X)	Llea congrata cohodula(c)	FOR LINE NUMBER: PAGE 104 OF 107			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c X 29 30b		
Any information copied from such Reports and Staten or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)	ic and address of any point		Solidi Contributions from Sacri Committee.		
National Association of Mutual Insu	rance Companies	PAC			
Full Name (Last, First, Middle Initial)			Date of Disbursement		
A. Ralston for Representative Commit	Raiston for Representative Committee				
Mailing Address P. O. Box 1196			07 08 2015		
•	State Zip Code		Transaction ID : B071DF3366A5B4AE9B8E		
Blue Ridge Purpose of Disbursement	GA 30513-0021				
Political Contribution			Amount of Each Disbursement this Period		
Candidate Name		Category/	4000.00		
		Type	1000.00		
	nent For: 2016 Primary General Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial)					
B. Committee to Elect Renee Unterma	an		Date of Disbursement		
Mailing Address Post Office Box 508		07 08 2015			
Buford	State Zip Code GA 30515-0508		Transaction ID : B659E6D0A9DFF478B8B8		
Purpose of Disbursement Political Contribution			Amount of Each Disbursement this Period		
Candidate Name		Category/ Type	500.00		
	nent For: 2016 Primary General Other (specify)				
Full Name (Last, First, Middle Initial)					
C. Friends to Elect Burt Jones			Date of Disbursement		
Mailing Address P O Box 767			07		
Jackson	State Zip Code GA 30233-0016		Transaction ID : B53B4B6AC68B1467AB9I		
Purpose of Disbursement Political Contribution					
Candidate Name		Category/ Type	Amount of Each Disbursement this Period 500.00		
Office Sought: House Disburser	nent For: 2016 Primary General Other (specify)	. 18-0			
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			2000.00		

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 105 OF 107		
ITEMIZED DISBURSEMENTS	Use separate schedule(s)			
TI ENIZED DIODOTIOENIENTO	for each category of the Detailed Summary Page	21b	22 23 24 25 26	
	Dotalied Julillary Fage	27	28a 28b 28c X 29 30b	
Any information copied from such Reports and Staten				
or for commercial purposes, other than using the name	e and address of any politic	al committee to	solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)				
$ \; angle$ National Association of Mutual Insu	ırance Companies F	PAC		
Full Name (Last, First, Middle Initial)				
A. Yarbrough/Senate 2016			Date of Disbursement	
			M M / D D / Y Y Y Y	
Mailing Address 2241 E Pecos Rd			07 08 2015	
City	State Zin Code		-	
City S Chandler	State Zip Code AZ 85225-6144		Transaction ID : BA0BCAB8900124126BA2	
Purpose of Disbursement	00220 0144			
Political Contribution			Amount of Each Disbursement this Period	
Candidate Name		Category/	500.00	
		Туре	500.00	
	nent For: 2016			
Senate President	Primary General			
State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
B. Kimberly Yee for Arizona 2016			Date of Disbursement	
Miniberry 100 for Alizona 2010			M = M / D = D / Y = Y = Y	
Mailing Address PO Box 83561			07 08 2015	
	State Zip Code AZ 85071-3561		Transaction ID : BAB6AED087A294E71820	
Phoenix Purpose of Disbursement	AZ 85071-3561			
Political Contribution			Amount of Each Disbursement this Period	
Candidate Name		Category/		
		Type	500.00	
Office Sought: House Disbursen	nent For: 2016			
	Primary General			
	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) Kenneth F. Sheets for State Representative			Date of Disbursement	
- Refinetif F. Sheets for State Repre	Scritative		M M / D D / Y Y Y Y	
Mailing Address PMB #869 6333 E. Mockingbird Lane			07 08 2015	
Suite 147				
	State Zip Code		Transaction ID : B975A04F24B8346409DE	
Dallas Purpose of Disbursement	TX 75214-2672			
Political Contribution			Amount of Each Disbursement this Period	
Candidate Name		Category/		
		Type	1000.00	
Office Sought: House Disbursen	nent For: 2016		, , , , , , , , , , , , , , , , , , , ,	
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
CURTOTAL of Dishurane anta This David (authors)			2000.00	
SUBTOTAL of Disbursements This Page (optional)		······	2555.50	
TOTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)	Hoo concrete sets dula (-)	FOR LINE		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	7 one) 22 23 24 25 26 28a 28b 28c X 29 30b	
Any information copied from such Reports and Sor for commercial purposes, other than using the				
NAME OF COMMITTEE (In Full)				
National Association of Mutual	Insurance Companies P	AC		
Full Name (Last, First, Middle Initial)				
A. Committee to Elect Ron Richar	Committee to Elect Ron Richard			
Mailing Address 1419 W 4Th St			07 30 2015	
City	State Zip Code		Transaction ID : BDC0E7B2BEB4342BBA1	
Joplin Purpose of Disbursement	MO 64801-3033		Transaction in . Bucoch beaters4288AT	
Political Contribution			Amount of Each Disbursement this Period	
Candidate Name		Category/	1000.00	
Office Sought: House Disb	ursement For: 2016	Type		
Senate	Y Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) B. Ohio Republican Party - State A	^ occupt		Date of Disbursement	
Onlo Republican Farty - State I	Account		M = M / D = D / Y = Y = Y	
Mailing Address 211 SOuth Fifth Street			07 30 2015	
City Columbus	State Zip Code OH 43215-5203		Transaction ID : B104943BF638D40A18D5	
Purpose of Disbursement Political Contribution			Amount of Each Disbursement this Period	
Candidate Name			Amount of Each Disbursement this Period	
		Category/ Type	1000.00	
	ursement For: 2015			
Senate President	Primary General			
State: District:	Other (specify) ▼ Other2015			
Full Name (Last, First, Middle Initial)				
C. Citizen's to Elect Don Gosen			Date of Disbursement	
Mailing Address 2448 Taylor Road			07 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code			
Wildwood	MO 63040-1222		Transaction ID: BFF6F97E02606469C89E	
Purpose of Disbursement Political Contribution				
Candidate Name		Category/ Type	Amount of Each Disbursement this Period 500.00	
Office Sought: House Disk	ursement For: 2016	.,,,,		
Senate	Y Primary General			
President	Other (specify)			
State: District:				
SUBTOTAL of Disbursements This Page (optio	nal)		2500.00	
TOTAL This Period (last page this line number	only)			

SCHEDULE B (FEC Form 3X)		EOD LINE	FOR LINE NUMBER: PAGE 107 OF 107		
ITEMIZED DISBURSEMENTS	Use separate schedule(s)				
	for each category of the Detailed Summary Page	21b	22 23 24 25 26		
	Betailed Gammary 1 age	27	28a 28b 28c 🗙 29 30b		
Any information copied from such Reports and Stater					
or for commercial purposes, other than using the nan	ne and address of any polition	cal committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)		240			
$ \; angle$ National Association of Mutual Inst	irance Companies I	PAC			
Full Name (Last, First, Middle Initial)					
A. Wieland Now			Date of Disbursement		
			M M / D D / Y Y Y Y		
Mailing Address 1015 Castleman Drive			07 30 2015		
City	State Zip Code				
Imperial	MO 63052-3830		Transaction ID: B5D76CAD9D6754E99990		
Purpose of Disbursement					
Political Contribution			Amount of Each Disbursement this Period		
Candidate Name		Category/	250.00		
Office Sought: House Disburser	nont For: 0040	Туре	200.00		
Office Sought: House Disburser	nent For: 2016 Primary General				
President	Other (specify)				
State: District:	(1				
Full Name (Last, First, Middle Initial)					
B. Friends Of Todd Richardson			Date of Disbursement		
			07 30 2015		
Mailing Address Po Box 310	Mailing Address Po Box 310				
City State Zip Code					
Poplar Bluff	MO 63902-0310		Transaction ID: BA5C9F2B6D7F9478EA46		
Purpose of Disbursement Political Contribution					
Candidate Name			Amount of Each Disbursement this Period		
Candidate Name		Category/ Type	1000.00		
Office Sought: House Disburser	nent For: 2016	туре			
	Primary General				
President	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial)					
C.			Date of Disbursement		
Mailing Address			M M / D D / Y Y Y Y		
Mailing / loarese					
City	State Zip Code				
Durnage of Dishursement					
Purpose of Disbursement					
Candidate Name		Catamani	Amount of Each Disbursement this Period		
		Category/ Type			
Office Sought: House Disburser	nent For:				
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
SUBTOTAL of Disbursements This Page (optional)			1250.00		
SOBTOTAL OF DISDUISEMENTS THIS Page (optional)		·····			
TOTAL This Period (last page this line number only)			18750.00		